

L01000020820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

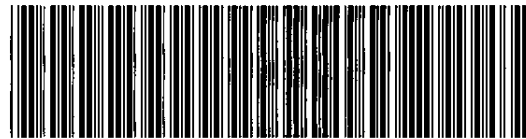
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400188887494

12/22/10--01014--004 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 DEC 22 AM 11:27

T. HAMPTON

DEC 23 2010

EXAMINER

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: April Investments, LLC

2. (a) Principal office address of limited liability company: 12407 Windswept Avenue

(Note: MUST BE STREET ADDRESS)

Riverview, Florida 33569

(b) Mailing address of limited liability company: 12407 Windswept Avenue

(Note: MAY BE POST OFFICE BOX)

Riverview, Florida 33569

3/31/2008

3. Date of filing/registration in Florida

L01000020820

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

CT Corporation Systems

Registered Office Address:

1200 South Pine Island Road
Plantation, Florida 33324

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

Jennifer Isaksen, Esq.

NEW Registered Office Address:

6814 W County Road 48

(MUST BE FLORIDA STREET ADDRESS)

Bushnell FL 33513

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

x Earl N. Richardson
Signature of a member or authorized representative of a member

x Earl N. Richardson
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Earl N. Richardson
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
APR 1 2008
AM 11:27