## L02000005199

(Requestor's Name)			
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(City/State/Zip/Phone #)			
, PICK-UP WAIT MAIL			
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(Business Entity Name) .			
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(Document Number)			
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Certified Copies Certificates of Status			
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Special metablicity is any officer.			

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SECRETARY OF STATE
TALL AHASSEF, FLORIO

D. BRUCE

NOV 13 2009

**EXAMINER** 

## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJI		3898, LLC ne of Limited Liability Company)	0
Dear S	ir or Madam:		
The en	closed Registered Agent/Registere	ed Office Change and fee(s) are submitted for filing.	
Please	return all correspondence concern	ing this matter to the following:	
•	Tom Tyler		
•	(Name of Person)		
	Thomas C. Tyler, Jr., P.A (Firm/Company)	می خو	
		te 200	אמא פּג ביי
	Address)	with the second of the second	2 w 2 w 2
	ງາວຈະຮຸດກຸ່ວໄດ້ ປະຊຸດ Venice, Florida 34285	OF STATE FLORIC	
	(City/State and Zip Code)	DE G	3
For fur	ther information concerning this n		
	Tom Tyler	at (at ()	
	(Name of Person)	(Area Code & Daytime Telephone Number)	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
	Enclosed is a check for the follo	wing amount:	
	☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

INHS18 (5/08)

## 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.

, and the second	
Name of the limited liability company:	3898, LLC
2. (a) Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	: 1762 South Drive Sarasota, Florida 34239
(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	same as above
3-4-2002	L02000005199
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	Thomas C. Tyler, Jr., P.A.
Registered Office Address:	981 Ridgewood Ave., #104 Venice, Florida 34292  ARRIVED TO THE STATE OF THE STATE O
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	V Registered Office address:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	735 East Venice Avenue, Suite 200
	Venice <u>■</u> ,FL_34285
If the limited liability company is not organized under the lathat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cathereby confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company.  (Signature of a member or authorized representative of a member)	t address of the registered office and the business ase of a Florida limited liability company, it is y an affirmative vote of the members of the limite
Deborah Tippie Hall, Manager	
(Printed or typed name of signee)	-
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proam familiar with and accept the obligations of my position of F.S. Or, if this document is being filed to merely reflect a confirm that the limited hability company has been notified	gree to act in this capacity. I further agree to per and complete performance of my duties, and as registered agent as provided for in Chapter 60 hange in the registered office address, I hereby in writing of this change.
(Signature of Registered Agent)	

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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00