## LU 200012631

(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



000160191500





B. KOHR

SEP - 3 2009

**EXAMINER** 



OR SERVICE DUMPARY						
	ACCOUNT NO.	:	1200000001	.95		200
	REFERENCE	:	115162	7673999		
	AUTHORIZATION	:	Jak pl		FIG. SS	7
	COST LIMIT	:	\$ 25.00	Mar	Par No	ES
ORDER DATE :	September 2, 200	9			The state of	* 83 2°
ORDER TIME :	2:27 PM					\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
ORDER NO. :	115162-005					
CUSTOMER NO:	7673999					
NAME:	CHANGE OF A  MASON ENTERPR					
	THE FOLLOWING AS			NC.		
		PR	OOF OF FILL	NG:		
CERTIF XX PLAIN						
CONTACT PERSON	: Carina L. Dun	lap	EXT# 29	51		
			EXAMINER:			

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## 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.

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1. Name of the limited liability company: Mason En	nterprises, LLC			
<ol> <li>(a) Principal office address of limited liability comp (<u>Note</u>; <u>MUST BE STREET ADDRESS</u>)</li> </ol>	any: 501 N. Beneva, Suite 210 Sarasota, FL 34232			
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	501 N. Beneva, Suite 210 Sarasota, FL 34232			
5-23-02	L02000012631			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of State:			
Registered Agent:	James F. Mason			
Registered Office Address:	4221 Escondito Circle Sarasota, FL 34238			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	IEW Registered Office address:  Corporation Service Company			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street Tallahassee ,FL 32301			
If the limited liability company is not organized under that after the change or changes are made, the Florida st office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorize liability company or as otherwise provided in the article limited hability company.  (Signature of a member or authorized representative of a member)	reet address of the registered office and the business e case of a Florida limited liability company, it is			
Carrie L. Tillman - Vice Presider	<del>ct</del>			
(Printed or typed name of signee)				
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my positions. Or, if this document is being filed to merely reflect confirm that the limited liability company has been notifications.	d agree to act in this capacity. I further agree to proper and complete performance of my duties, and I on as registered agent as provided for in Chapter 608, a change in the registered office address, I hereby led in writing of this change.			
By Composition Service Composition (Signature of Registered Agent)	Sonya L. Cordell Assistant VP			

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