## L02000013592

(Requestor's Name)		
•		
(Address)		
(Address)		
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL .
(Business Entity Name)		
(Document Number)		
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S. HAWKES
AUG 1 3 2009
EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT:		
	d Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:		
Mary Lynn Williams		
Name of Person		
Greg A. Betterton, PA		
Firm/Company		
735 E Venice Ave, Suite 200		
Address		
Venice, FL 34285		
City/State and Zip Code		
marylynn@bettertonlaw.com E-mail address: (to be used for future annual report notificati	on)	
For further information concerning this matter, ple		
Tot futther information concerning this matter, pie	ase can.	
Mary Lynn Williams at (_	941 ) 488-4422	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

## 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:	FLEXSCAPE, L.L.C.		
2. (a) Principal office address of limited liability compan	y:		
(Note: MUST BE STREET ADDRESS)	8855 HUNTINGTON POINTE DRIVE SARASOTA FL 34238		
(b) Mailing address of limited liability company:	- 25 Mg 1		
(Note: MAY BE POST OFFICE BOX)	8855 HUNTINGTON POINTE DRIVE SARASOTA FL 34238		
09/16/2002	L02000013592		
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:	Greg A. Betterton		
Registered Office Address:	981 Ridgewood Avenue, Suite 101 Venice, FL 34285		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:		
NEW Registered Agent:			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	735 East Venice Avenue, Suite 200		
	Venice ,FL34285		
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.  Signature of a member or authorized representative of a member			
Printed or typed name of signee	<del>_</del>		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the providing and I am familiar with and accept the obligations of my proceedings of the confirmation of the providing that the limited liability comparations of the comparation of the co	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office sy has been notified in writing of this change.		
Signature of Registered Agent			

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