## LO2000020492

(Re	questor's Name)	
(Ad	dress)	
hA)	dress)	
(,,_		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



200149068852

04/09/09--01008--004 \*\*55.00

FILED

O9 APR -9 PH 2: 05

SECRETARY OF STATE

ALLAHASSEE, FINALE

D. BRUCE

APR 10 2009

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Pioneer Realty of Flori (Name	ida, LLC e of Limited Liability Company)	<b></b>
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.	
Please return all correspondence concernir	ng this matter to the following:	
Diane Aunapu Masaitis		
(Name of Person)		
Pioneer Realty of Florida, LLC (Firm/Company)	SECF TALLA	٠.
800 Heron Point Circle	PR -	<u>11</u>
(Address)		n
DeLand, FL 32724		j
(City/State and Zip Code)		
For further information concerning this ma	atter, please call:	
Diane Aunapu Masaitis	at ( 386 ) 748-0143	
(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 follow	ving 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 608.5 company submits the following statement in order to chain the State of Florida.	08, Florida Statutes, the undersigned limited liability ange its registered office or registered agent, or both,
1. Name of the limited liability company: Pioneer Re	ealty of Florida, LLC
2. (a) Principal office address of limited liability compared (Note: MUST BE STREET ADDRESS)	ny: 800 Heron Point Circle DeLand, FL 32724
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	800 Heron Point Circle DeLand, FL 32724
08/12/2002	L02000020492
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept. of State:
Registered Agent:	Diane M. Aunapu
Registered Office Address:	206 N. Woodland Blvd.  DeLand, FL 32720
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	EW Registered Office address:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	800 Heron Point Circle
	<u>DeLand</u> ,FL <u>32724</u>
If the limited liability company is not organized under the that after the change or changes are made, the Florida streetheat office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.  (Signature of a member or authorized representative of a member)  Diane Aunapu Magaitis (Printed or typed name of signee)	et address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited of organization or the operating agreement of the
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the part am jamiliar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified.	agree to act in this capacity. I further agree to roper and complete performance of my duties, and I n as registered agent as provided for in Chapter 608, a change in the registered office address, I hereby bed in writing of this change.

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

(Signature of Registered Agent)