

(Requestor's Name)			
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PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
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Special Instructions to Filing Officer:			
OCT 2 5 2012			
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ACCOUNT NO. : 12000000195				
REFERENCE : 385875 7385507				
AUTHORIZATION: Spelle le man				
COST LIMIT : \$ 25.00				
ORDER DATE: October 18, 2012				
ORDER TIME : 3:55 PM				
ORDER NO. : 385875-006				
CUSTOMER NO: 7385507				
CHANGE OF AGENT				
NAME: 6928 DELAND, LLC				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY  XX PLAIN STAMPED COPY				

EXAMINER:

CONTACT PERSON: Stephanie Milnes -- EXT# 52920

## 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. N	Name of the limited liability company: 6928 DELANI	O, LLC
2. (a) Principal office address of limited liability com (Note: MUST BE STREET ADDRESS)		: 1750 N Florida Mango Road Suite 103
		-West Palm Beach, FL 33409
(b) Mailing address of limited liability con	b) Mailing address of limited liability company:	1750 N Florida Mango Road
(Note: MAY BE POST OFFICE BOX)		Suite 103
		West Palm Beach, FL 33409
00	1001000	T 00000000000
	/28/2002	L02000022356
3. I	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:	Mapes, Paul
	Registered Office Address:	1601 Belvedere Road, Suite 407 South West Palm Beach, FL 33406
		A AMERICAN CONTRACTOR
(	b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:
	NEW Registered Agent:	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 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 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.		
(Sign	nature of a member or authorized representative of a member)	OR L
1	John Metz, Authorized Representat	ive A
(Pri	nted or typed name of signee)	
I he con am F.S. con	ereby accept the appointment as registered agent and a uply with the provisions of all statutes relative to the pro familiar with and accept the obligations of my position . Or, if this document is being filed to merely reflect a c firm that the limited liability company has been notified	gree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby I in writing of this change.
By:	Scan	
(Sig	mature of Register (Magent) Corporation Service Company	Sylvia Queppet, Asst. Vice President

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

INHS18 (05/08)