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K. SALY EXAMINER OCT 2 5 2012



ACCOUNT NO. : 12000000195			
REFERENCE : 385875 7385507			
AUTHORIZATION : Javels of			
COST LIMIT : \$25.00			
ORDER DATE : October 18, 2012			
ORDER TIME : 3:55 PM			
ORDER NO. : 385875-007			
CUSTOMER NO: 7385507			
CHANGE OF AGENT			
NAME: 6929 SANFORD, LLC			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:			
CERTIFIED COPY XX PLAIN STAMPED COPY			
CONTACT PERSON: Stephanie Milnes EXT# 52920			
EXAMINER:			

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. Nam	e of the limited liability company: 6929 SANFOR	RD, LLC
2. (a) I	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	r: 1750 N Florida Mango Road Suite 103
		West Palm Beach, FL 33409
(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
		West Fallit Death, 17, 33403
08/28/2	2002	Suite 103 West Palm Beach, FL 33409 L02000022360 4. Document number
3. Date	of filing/registration in Florida	4. Document number
· 5 (-)	D1-4	
5. (a)	Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:
]	Registered Agent:	Mapes, Paul
Registered Office Address:	1601 Belvedere Road, Suite 407 South	
•	registered of meet radiose.	West Palm Beach, FL 33406
(b) I	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	W Registered Office address:
<u>]</u>	NEW Registered Agent:	Corporation Service Company
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		1201 Hays Street
		Tallahassee FL 32301
that after office of hereby of liability	mited liability company is not organized under the left the change or changes are made, the Florida stree of the registered agent will be identical. Or, in the confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company.	t address of the registered office and the business ase of a Florida limited liability company, it is a affirmative vote of the members of the limited
(Signature	of a member or authorized representative of a member)	_
/	John Metz, Authorized Repres	entative
	or typed name of signee)	_
I hereb comply am fam F.S. Or confirm	y accept the appointment as registered agent and a with the provisions of all statules relative to the pri iliar with and accept the obligations of my position , if this document is being filed to merely reflect a c 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.

(Signature of Registered Agent) Corporation Service Company Sylvia Queppet, Asst. Vice President

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