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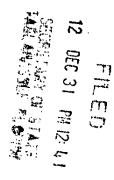
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
JAN 3 2013					
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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: MAXREZ, LLC					
Name of Limited 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:					
Stavan I Cilhart					
Steven J. Gilbert					
Name of Person					
MAXREZ, LLC					
Firm/Company					
1091 Stoneham Drive					
Address					
Groveland, Florida 34736					
City/State and Zip Code					
steve@maxrez.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Steven J. Gilbert 31, 561 , 601-6869					
Name of Person Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: MAILING ADDRESS:					
Registration Section Registration Section					
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327					
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314					
Tallahassee, Florida 32301					
Enclosed is a check for the following amount:					

□ \$55 Filing Fee & Certified Copy

■ \$25 Filing Fee

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.

i. Na	ame of the limited liability company: MAXREZ, LLC		
2. (a)	Principal office address of limited liability comparison (Note: MUST BE STREET ADDRESS)	any: 1091 Stoneham Drive	
		Groveland, Florida 34736	
(o)) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1091 Stoneham Drive	200 0 1
	(======================================	Groveland, Florida 34736	
09/27/2	002	L02000025452	2 1
3. Da	ate of filing/registration in Florida	4. Document number	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
	Registered Agent:	Steven J. Gilbert	
	Registered Office Address:	8581 Windfall Drive	
		Boynton Beach, Florida 33472	
	NEW Registered Agent:		
	NEW Registered Office Address:	1091 Stoneham Drive	
	(MUST BE FLORIDA STREET ADDRESS)	Groveland	FL 34736
confi and t liabil the m the o	limited liability company is not organized under the rmed that after the change or changes are made, the he business office of the registered agent will be ide ity company, it is hereby confirmed that the change nembers of the limited liability company or as other perating agreement of the limited liability company. J. Gilbert dor typed name of signee	Florida street address of the case of	the registered office
I her comp and I Chap addre	reby accept the appointment as registered agent and ly with the provisions of all statutes relative to the p am familiar with and accept the obligations of my oter 608, F.S. Or, if this document is being filed to b ess, I hereby confirm that the limited liability compa	l agree to act in this capa proper and complete perf position as registered age nerely reflect a change in any has been notified in w	city. I further agree to ormance of my duties, ent as provided for in the registered office riting of this change.

Signature of Registered Agent