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(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
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(Document Number)			
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SECTIONARY OF STATE

M. THOMAS

OCT 2 1 2008

EXAMINET

COVER LETTER

то:	Registration Section Division of Corporations	
SUBJ	ECT: LANT HOLDINGS SEF	RVICES, LLC e of Limited Liability Company)
Dear S	Sir or Madam:	
The er	nclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please	return all correspondence concernin	ng this matter to the following:
DEBOR	RA KELLEY (Name of Person)	
LANT H	HOLDINGS SERVICES, LLC (Firm/Company)	
P.O. B	OX 897 (Address)	
LAND	O' LAKES, FL 34639	
	(City/State and Zip Code)	
For fu	rther information concerning this ma	atter, please call:
DEBO	RA KELLEY	at (813) 996-6201
	(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	ing 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: LANT HC	DLDINGS SERVICES, LLC
2. (a) Principal office address of limited liability comp. (Note: MUST BE STREET ADDRESS)	pany: 4109 MARLOW LOOP LAND O' LAKES, FL 34639
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	P.O. BOX 897 LAND O' LAKES, FL 34639
1/14/2003	L03000001512
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:	SPIEGEL & UTRERA, P.A.
Registered Office Address:	on the records of the Florida Dept. of State: SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST 4TH FLOOR MIAMI. FL 33145 NEW Registered Office address:
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	NEW Registered Office address:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	4109 MARLOW LOOP LAND O' LAKES, FL 34639 ,FL
If the limited liability company is not organized under that after the change or changes are made, the Florida's 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 article limited liability company. (Signature of a member or authorized representative of a member)	the laws of the State of Florida, it is hereby confirmed treet address of the registered office and the business ne case of a Florida limited liability company, it is ed by an affirmative vote of the members of the limited es of organization or the operating agreement of the
DEBORA KELLEY (Printed or typed name of signce) I hereby accept the appointment as registered agent are comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my posit F.S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been not	nd agree to act in this capacity. I further agree to e proper and complete performance of my duties, and I tion as registered agent as provided for in Chapter 608, t a change in the registered office address, I hereby ified in writing of this change.

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

(Signature of Registered Agent)