# - (030000)0/670

(Requestor's Name)
(Address)
(Address)
(1881-355)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Dodanieni Namesi)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300061679663

12/65/05--01048--003 \*\*35.00

2006 JEN -9 FM 4: 14

103 Cf

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: MINGTER ABBEY, LLC. (Name of Corporation)
DOCUMENT NUMBER: LO300001670  The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LYNNE CLES Russo (Name of Contact Person)
MINERYA STUD, LLC (Firm/Company)
12385 NW 225-P
Reduch Fl. 32686
For further information concerning this matter, please call:
(Name of Contact Person) at (352) 591-1110 (Area Code & Daytime Telephone Number)
(Thea Code & Daytime Telephone (William)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 8, 2005

LYNNE DEK RUSSO 12385 NW 225-A REDDICK, FL 32686

SUBJECT: MINSTER ABBEY, LLC

Ref. Number: L03000001670

We have received your document for MINSTER ABBEY, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 205A0007103

## ROBERT A. STERMER, LL.M. (TAX)

ATTORNEY AT LAW 7763 SW HIGHWAY 200 OCALA, FLORIDA 34476

TELEPHONE: (352) 861-0447

E-MAIL: svI@atlantic.net

FACSIMILE: (352) 861-0494

January 4, 2006

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re:

Minster Abbey, LLC

Half A Scent, LLC

Misy, LLC

Minerva Stud, LLC So Cheerful, LLC

Dear Sirs:

With reference to the above captioned limited liability companies, please find enclosed cover letters and completed Statement of Change of Registered Agent for each.

The filing fees for these changes were previously paid. Please refund the overpayment of those filing fees previously made to each company.

Should anything further be necessary, please do not hesitate to contact my office.

Very truly yours,

Robert A. Stermer

RAS/jv Enclosures

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Minster Abbey, LLC (Name of Limits	ed Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	c Change and fee(s) are submitted for filing.
Please return all correspondence concerning this r	matter to the following:
rease return an correspondence concerning and r	matter to the following.
Lynne Dek Russo (Name of Person)	<del></del>
(Name of Lesson)	
(Firm/Company)	2006 ***********************************
	>
12385 NW 225-A (Address)	
(Address)	
paddiah planida 22000	
Reddick, Florida 32686 (City/State and Zip Code)	
	,
For further information concerning this matter, pl	ease call:
Robert A. Stermer at (	
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following an	nount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

INHS18 (8/05)

## 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.

agent, or both, in the State	e of Pioriaa.				
1. The name of the limits	ed liability company is	: Minster Abbey, LLC			
2. The mailing address o	f the limited liability c	ompany is:			
12385 NW 225-2	A Reddick, Flo	orida 32686			
	:				
1/13/03		L030000167	0		
3. Date of filing/registrat	ion in Florida	4. Document numb	er		
5. The name of the regist Florida Department of		istered office address as shown or	the recor	ds of t	he
	Robert A. St				
		Name			
	<u>8585 NW High</u>	way 200 Address			
		da 34481	ZS	307	
	City	, State and Zip		5	\$600 metra
2 POIL 1 1 1	•	-	ŧΩ		i i
6. The name and address	of the new registered a	agent and/or office:	3.83 (58)	2006 JAN -9	derman derman
	Robert A. St	ermer, LL.M.	EF, C		
		Name	<u> </u>	P	-
		way 200	335	<del></del>	* t # **
	Florida street addres	ss (P.O. Box NOT acceptable)	豆匠	<u>-</u>	
		24476	20.50		
	Ocala	FL 34476 State and Zip			
	City,	State and Zip			
confirmed that after the c	thange or changes are refither registered agent wereby confirmed that the mited liability company of the limited liability.		f the regis	tered o	office ed
Lyune dek (Printed or typed name of signee	Russo				
I hereby accept the appo comply with the provision and I am familiar with ar Chapter 608, F.S. Or, if address, I hereby confirm	intment as registered on of all statutes relatived accept the obligation this document is being that the limited liabil.	agent and agree to act in this cap ve to the proper and complete per ns of my position as registered as filed to merely reflect a change i ity company has been notified in	acity. I fu formance gent as pro in the regi writing of	irther of of my ovided stered this ch	agree to duties, for in office lange.
(Signature of Registered Agent)		<del></del>			

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