#L030000/3700

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
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COVER LETTER

Division of Corporations		
SUBJECT: Laccy And Jean SPE	OCEF Family LLC	
SUBJECT: <u>larry And Jean Spencer Family LLC</u> 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:		
Troube retain at portespondence concerning and matter to the renowing.		
Lacou Spencer		
Larry Spencer Name of Person		
Lacat and Taga Space	Suite in	
Larry and Jean Spencer f	amily ac	
	•	
385 White D. 4 Dicelo		
385 White Dak Circle	 	
Know Tal 222/11		
KODAK, TN 37764 City State and Zip Code		
· · · · ·		
E-mail address: (to be used for future annual report notification)		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
or target mornand concerning this matter, proude can.		
Larry or Jean Spenceral (954) 638-7400		
Name of Person	Area Code & Daytime Telephone Number	
. March 1 visus	ruod code de longuino relegione rumber	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	

TO: Registration Section

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:	and Jean Spencer Family LLC	
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	385 White Oak Circle RODAK, IN 37764	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Same Same	
3. Date of filing/registration in Florida 4	LO 30000 13700 2	
5. (a) Registered Agent and Registered Office shown on th	e records of the Florida Dept. of States	
Registered Agent:	Larry Spencer	
Registered Office Address:	4040 NW 100 AVR Coral Springs, FL 33065	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address :		
NEW Registered Agent:	Jean Surochak	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	COTAL SPINAS FL 33067	
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 it 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. Signature of a member or authorized regresentative of a member		
Printed or typed name of signee		
I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the propand I am familiar with and accept the obligations of my posi Chapter 608, F.S. On if this document is being filed to mere address. Thereby confirm that the limited liability company that the limited liability company is the state of the confirm that the limited liability company is the state of the confirmation.	ree to act in this capacity. I further agree to ser and complete performance of my duties, tion as registered agent as provided for in ly reflect a change in the registered office has been notified in writing of this change.	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314		

FILING FEE: \$25.00