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T. HAMPTON

SEP 2 6 2008

EXAMINER

COVER LETTER

SUBJECT: CHANGING REGISTERED AGENT.		LICE
	Company)	
(Name of Limited Liability		•
	•	
Dear Sir or Madam:		
	/	· ·
The enclosed Registered Agent/Registered Office Change and fe	e(s) are submitted to	r filing.
Please return all correspondence concerning this matter to the fo	llowing:	
N I I		
Name of Person)		
(Name of Person)		
·.		
(F: 10)		
(Firm/Company)		
7700 (1 (1 2) (1 2)	***	
1200 W. (amino Regl, Suite 302		
(Addiess)		
Boca Rata, FL 33/33		
Boca Rata, FL 33/33 (City/State and Zip Code)	· ·	,
For further information concerning this matter, please call:	•	•
1 of further information concerning this matter, preuse can.		
Daniel Kaskel at (561) 2	20_26/0	
(Name of Person) (Area Code &	Daytime Telephone	Number)
(Maine of Poison)	· Daymine Telephone	, , , , , , , , , , , , , , , , , , , ,
CONTENT/COVIDED ADDRESS. MAY THE	ADDRECO.	٠
STREET/COURIER ADDRESS: MAILING Registration Section Registratio	ADDRESS: on Section	
	f Corporations	
Clifton Building P.O. Box 6		
2661 Executive Center Circle Tallahassee Tallahassee, Florida 32301	e; Florida 32314	
Enclosed is a check for the following amount:		,
_	ng Fee & Certified Co	nnv
× 17	is i ee a continud of	~PJ
INHS18 (5/08) \$ 425.00		•

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: Berdye	s, UC			
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	7200 W. (OM/NO Red Suite 302 Bow Rator FL 33433			
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Sane.			
6/9/03	L030000 Z1176			
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:	Daniel A. Kukel, P.A.			
Registered Office Address:	BUG Reton, PL 33/33			
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:				
NEW Registered Agent:	Kods: Law Firm, P.A.			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	701 W. Cyptess Creek Road Soute 303 Fort Landerstolle FL 33309			
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 organization or the organization of the limited liability company. (Signature of a member of hyper and company and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608 F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.				
(Signature of Registered Agent)				

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