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(Address)
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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Maudsley Properties, LLC
(Name of corporation)
DOCUMENT NUMBER: L03000021446
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:
Keliy Alan Maudsley
(Name of person)
Maudsley Properties, LLC (Name of firm/company)
22 SE 1st Avenue (Address)
Delray Beach, FL 33444  (City/state and zip code)
For further information concerning this matter, please call:
Kelly Alan Maudsley at ( 561 ) 330-6250 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

CR2E045(09/03)

No Money Wrong Form



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 28, 2004

KELLY ALAN MAUDSLEY MAUDSLEY PROPERTIES, LLC 22 SE 1ST AVENUE DELRAY BEACH, FL 33444

SUBJECT: MAUDSLEY PROPERTIES, LLC

Ref. Number: L03000021446

We have received your document for MAUDSLEY PROPERTIES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached form to change the Registered Agent information for this Limited Liability Company, the form enclosed is for a Corporation.

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 call (850) 245-6967.

Letter Number: 104A00056787

Michelle Hodges Document Specialist

## 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. The name of the limited liability company is: MAUdsley Properties, LLC.
2. The mailing address of the limited liability company is: 22 SE IST AVENUE,
Delray Beach, FL 33444
2003
3. Date of filing/registration in Florida 4. Document number
0, 200 01 111119 1-9-101010 111 1 101010
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Lynn MROCZEK
INVESTED IN THE PROPERTY OF TH
DEIRAY BEACH, FL 33444  City, State and Zip
DELRAY BEACH, FL 33444 FE 8
Delkay Beach, FL 33444 City, State and Zip
6. The name and address of the new registered agent and/or office:
Address  Delkay Beach, FL 33444  City, State and Zip  6. The name and address of the new registered agent and/or office:  Tydith N. Kay  Name  22 SE IST AUENGE  Florida street address (P.O. Box NOT acceptable)
Name
ANDE IST AVENUE
Florida street address (P.O. Box NOT acceptable)
DE/ray Bch FL 33444  City, State and Zip
City, State and Zip
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 representative of a member)
KElly Alan Maydsley
(rinned or typed name of signee)
I hereby accept the appointment as registered agent 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)
79
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

**FILING FEE: \$25.00** 

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