L03000025333

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COVER LETTER

	Registration Section Division of Corporations		
SUBJE	CT: BRADENTON ENTERPRISE LL	<u>C</u>	
	(Name of Limited	d Liability Company)	
Dear Si	r or Madam:		
The end	closed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please r	return all correspondence concerning this m	natter to the following:	
MICHA	AEL I. BERNSTEIN, ESQ.		
	(Name of Person)		
MICHA	AEL I. BERNSTEIN, P.A.		
10110717	(Firm/Company)	· · · · · · · · · · · · · · · · · · ·	
1688 N	MERIDIAN AVENUE, SUITE 418		
	(Address)		
MIAMI	BEACH, FLORIDA 33139		
	(City/State and Zip Code)		
For furt	her information concerning this matter, ple	ase call:	
MICHA	EL I. BERNSTEIN, ESQ. at (3	305) 672-9544	
	(Name of Person)	(Area Code & Daytime Telephone Number)	
	,	,	
	STREET/COURIER ADDRESS:	MAILING ADDRESS:	
	Registration Section	Registration Section	
I	Division of Corporations	Division of Corporations	
	Clifton Building	P.O. Box 6327	
	2661 Executive Center Circle	Tallahassee, Florida 32314	
	Tallahassee, Florida 32301		
3	Enclosed is a check for the following amo	ount:	
[.	✓ \$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. The name of the limited liability company is:	BRADENTON ENTERPRISE LLC	
2. The mailing address of the limited liability co	mpany is: 1055 N.E. 125TH STREET, NOR	TH MIAMI, F
33161		
07/11/2003	L03000025333	
3. Date of filing/registration in Florida 4. Document num		
5. The name of the registered agent and the regist Florida Department of State:	tered office address as shown on the record	is of the
MICHAEL I. BERNS	STEIN, P.A.	
	Name	
1680 MICHIGAN AVE		9
	Address	SE(/ISI
MIAMI BEACH, FLOR		SECRETAR VISION OF C
City,	State and Zip	2
6. The name and address of the new registered ag	gent and/or office:	* *
MICHAEL I. BERNS	ΓΕΙΝ, P.A.	
1688 MERIDIAN AVE	Name NUF SUITE 418	÷ 27
· · · · · · · · · · · · · · · · · · ·	s (P.O. Box NOT acceptable)	N.S.
MIAMI BEACH	FL 33139	
City, S	tate and Zip	
If the limited liability company is not organized a confirmed that after the change or changes are m and the business office of the registered agent wi liability company, it is hereby confirmed that the of the members of the limited liability company or the operation agreement of the limited liability	ade, the Florida street address of the registed ll be identical. Or, in the case of a Florida change(s) was/were authorized by an affirm	ered office limited
(Signature of a member or authorized representative of a member	·r)	
MICHAEL I. BERNSTEIN, ESQ.		
(Printed or typed name of signee)		
I hereby accept the appointment as registered as comply with the provisions of all statutes relative and I am familiar with and accept the obligation. Chapter 608 F.S. Or, if this document is being faddress, I hereby confirm that the limited liability	zent and agree to act in this capacity. I fur to the proper and complete performance of s of my position as registered agent as pro- iled to merely reflect a change in the regis y company has been notified in writing of i	rther agree to of my duties, vided for intered office this change.

(Signature of Registered Agent)

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