63000030220

(A 50)	VIVIAN & AVI 2040 LAKE PO WESTON, FL	33326 33326
(Cit)	//State/Zip/Phone	<u> </u>
(Cit)	notate/zip/Prione	; #r)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
		1
		Į

Office Use Only



900040527359

08/27/04--01042--004 **25.00

SECRE JAHY OF STATE TALLAHASSEE, FLORIDA

UG 27 AM 10:56

13/30220 (H)

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: THE HOME NANNY LLC.
2. The mailing address of the limited liability company is: 2040 LAKE POINT
DRIVE, WESTON FL 33326
08/14/03
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
CORPORATION SERVICE COMPANY Name
1201 HAYS 54. Address
Address
TAUAHASSEE FL, 32301 City, State and Zip
6. The name and address of the new registered agent and/or office:
AUI GOSHE~
Name /
2040 LAKE POINT DRIVE Florida street address (P.O. Box NOT acceptable)
WESTON FL 32326 Ex 8
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is bereby 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.
(Signapher of a member or authorized representative of a member)
(Printed 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 obligation 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 Registred Aceta)
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18(10/99)