## 103000035532

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J. BRYAN

JUN -5 2009

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: National Equities  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:		
Judson Villa Name of Person		
National Equities LLC Firm/Company		
Address  Sarasota FL 34239  City/State and Zin Code		
Sarasota FL 34239 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Judson Villa at (941) 416-5915  Name of Person Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:		
\$25 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.

• d	1	
1. Name of the limited liability company: Name of the limited liability company:	of Equities	
2. (a) Principal office address of limited liability company	: 3316 Key Ave	
(Note: MUST BE STREET ADDRESS)	Sarasota, FL 34239	
(b) Mailing address of limited liability company:	3316 Key Ave	
(Note: MAY BE POST OFFICE BOX)	Sarasota, FL 34239	
9/15/2003	L0300035532	
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:	TEH Comptrollers, Inc.	
Registered Office Address:	200 Capri Isles Blid. Ste Venice, FL 34292	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> <u>NEW</u> Registered Agent:	V Registered Office address:  Judson Villa	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3316 Key Ave	
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherworthe operating agreement of the limited liability company.  Signature of a member or authorized representative of a member  Printed or typed name of signee  I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the province of the province of the obligations of my post Chapter of St. F.S. Or, if this document is being filed to mendadress. I hereby confirm that the limited liability company	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization	
Signature of Registered Agent	-	

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