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## 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:	. vs Far A Chause LLC
2. The mailing address of the limited liability company is :	4673 Kemper Drive.
	Love Tree, Colorapo 8024
3. Date of filing/registration in Florida	L0300037976  4. Document number
5. The name of the registered agent and the registered office Florida Department of State:  Name  Name  Address  City, State and Zi	Court FL 34695
6. The name and address of the new registered agent and/or of the new registered agent and/or of the name and address of the new registered agent and/or of the name and address of the new registered agent and/or of the name and address of the new registered agent and/or of the name and address of the new registered agent and/or of the name and address of the new registered agent and/or of the name and address of the new registered agent and/or of the name and address of the new registered agent and/or of the name and address of the new registered agent and/or of the name and address of the new registered agent and/or of the name and address of the new registered agent and/or of the name and address of the new registered agent and/or of the name and address of the	Coveledy PER AND PART
If the limited liability company is not organized under the lay confirmed that after the change or changes are made, the Florand the business office of the registered agent will be identically company, it is hereby confirmed that the change(s) when members of the limited hability company or as otherwise the operating agreement of the limited liability company.	rida street address of the registered office
(Signature of a member or authorized representative of a member)  Compared to the compared of typed name of signee)	
I hereby accept the appointment as registered agent and agr comply with the provisions of all statutes relative to the prop and I am familiar with and accept the obligations of my posi Chapter 508, F.S. Or, if this document is being filed to mere address, I hereby confirm that the limited liability company l	ree to act in this capacity. I further agree to eer and complete performance of my duties, tion as registered agent as provided for in ly reflect a change in the registered office has been notified in writing of this change.
(Signature of Registered Agent)  Division of Corporations, P.O. Box 632	7, Tallahassee, FL 32314

**FILING FEE: \$25.00** 

INHS18(10/99)