1030000 43545

Mike & Winnie Koek
Mike & Winnie Koel 2305 (Sth Ct., Wes (Address)
Bradenton, H. 34009 (Address)
(City/State/Zip/Phone #)
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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 S liability company submits the following statement in order to change i agent, or both, in the State of Florida.	Statutes, the undersigned limited ts registered office or registered
1. The name of the limited liability company is:	LLC .
2. The mailing address of the limited liability company is: 4303	IST ST E Suite 30
Bradenton, Fl 34208	<u> </u>
Nov 10, 2003 LO3	000043545
3. Date of filing/registration in Florida 4. Docum	ent number
5. The name of the registered agent and the registered office address as s Florida Department of State:	
1303 /8 St. E. Ste	500
Florida Department of State: James Wareender Name 4303 / St St E. St & Address Address City, State and Zip	-8
6. The name and address of the new registered agent and/or office:	
MICHARL Loebel Name 2305 450 Courer,	VEST
Florida street address (P.O. Box NOT accep	
Scapenson FL 34209 City, State and Zip	SECHET AUG
If the limited liability company is not organized under the laws of the St confirmed that after the change or changes are made, the Florida street a and the business office of the registered agent will be identical. Or, in the liability company, it is hereby confirmed that the change(s) was/were and the members of the limited liability company or as otherwise provided in the operating agreement of the limited liability company.	ate of Florida, it is hereby ddress of the registered of the case of a Florida limited was a florida limited of the case of the c
(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 agree to act in comply with the provisions of all statutes relative to the proper and con and I am familiar with analycept the obligations of my position as reg Chapter 608, F.S. Or, if this document is being filed to merely reflect a address, I hereby confirm that the limited liability company has been no	this capacity. I further agree to injecte performance of my duties, istered agent as provided for in change in the registered office office of this change.
(Signature of Registered Agent) Division of Corporations, P.O. Box 6327, Tallahas	See. FL 32314
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FILING FEE: \$25.00

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