

MAY 16 2008 12:12 PM  
Division of Corporations

BUSH ROSS, P.A.

NO. 9260

Page 1 of 1

L0400009796

Florida Department of State  
Division of Corporations  
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## Electronic Filing Cover Sheet

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## To:

Division of Corporations  
Fax Number : (850) 617-6380

## From:

Account Name : BUSH ROSS, P.A.  
Account Number : I19990000150  
Phone : (813) 224-9255  
Fax Number : (813) 223-9620Celeste Perrino  
(999999-99999)SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 MAY 16 AM 10:31

FILED

RECEIVED  
2008 MAY 16 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## REGISTERED AGENT CHANGE

POLYMOON INVESTMENTS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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EXAMINER

MAY. 16. 2008 12:12PM

BUSH ROSS P A

NO. 3260 P. 2/3

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**COVER LETTER**

To: Registration Section  
Division of Corporations

SUBJECT: Polymoon Investments, LLC  
(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:

Celeste Perrino  
(Name of Person)  
Bush Ross, P.A.  
(Firm/Company)  
1801 North Highland Avenue  
(Address)  
Tampa, Florida 33602  
(City/State and Zip Code)

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2008 MAY 16 A 10:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Celeste Perrino at ( 813 ) 204-6425  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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BUSH ROSS P A

NO. 3260 P. 3/3

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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 617.508, 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: Polymoon Investments, LLC
2. The mailing address of the limited liability company is: 19706 Morden Blush Dr.  
Lutz, FL 33558
3. Date of filing/registration if Florida: 2/4/2004
4. Document number: 104000009796

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Andrew T. Jenkins  
1801 N. Highland Avenue  
Tampa, FL 33602

6. The name and address of the new registered agent and/or office:

Bush Ross Registered Agent Services, LLC  
Name

1801 North Highland Avenue  
Florida street address (F.O. Box NOT acceptable)

Tampa, Florida 33602  
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby 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.

[Signature]  
(Signature of a member or authorized representative of a member)

JERRY R. ROSEN  
(Printed or typed name of signer)

*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.. Of, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

[Signature]  
(Signature of Registered Agent)

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

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