L04000018586

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B. KOHR

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EXAMINER

COVER LETTER

Division of Corpo	rations		
SUBJECT:		ats (Orlando), LLC	
	Name of Limit	ed Liability Company	۶.
Dear Sir or Madam:			1
The enclosed Registered	Agent/Registered Office	e Change and fee(s) are su	ibmitted for filing.
Please return all correspo	ndence concerning this	matter to the following:	
	Suzanne Bonham ne of Person		
	ats (Orlando), LLC n/Company		
	D. Box 1185		
	, Florida 34761 tte and Zip Code	<u> </u>	
Suzannebo E-mail address: (to be used	onham@ymail.com for future annual report notifica	tion)	
For further information co	oncerning this matter, pl	lease call:	
			590-2478
STREET/COURII Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, Florida	ER ADDRESS: nations nter Circle	Area Code & Daytime MAILING ADDRES Registration Section Division of Corporati P.O. Box 6327 Tallahassee, Florida 3	SS: ons
Enclosed is a che	ck for the following an	nount:	
\$25 Filing Fee		\$55 Filing Fee & C	Certified Copy

TO:

Registration Section

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. Name of the limited liability company:	rban Flats (Orlando), LLC 💈 💯				
2. (a) Principal office address of limited liability company	7: 10353 Burris Court 🖔 ို				
(Note: MUST BE STREET ADDRESS)	Orlando, Florida 32836				
(b) Mailing address of limited liability company:	P.O. Box 1185				
(Note: MAY BE POST OFFICE BOX)	Ocoee, Florida 34761				
3/9/04	L04000018586				
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:	Charles R. Harrison				
Registered Office Address:	1413 Trovillion Avenue Winter Park, Florida 32789				
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	Donna Suzanne Bonham				
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	10353 Burris Court				
	Orlando ,FL32836				
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 of a member or authorized representative of a member					
Donna Suzanne Bonham, CEO and Member Printed or typed name of signee	-				
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pround I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.				

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

Signature of Registered Agent