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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Name of	HFAV LLC f Limited Liability Company
	annua masini, company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
GARY H HERMAN Name of Person	
Name of Ferson	
HFAV LLC	
Firm/Company	
1901 N. OCEAN BLVD. STE	สมค.ศ พระพา(ชาวุก ค.ศ.) 5. 12B - การกระทฐสา
Address	- 12U
i .	
FORT LAUDERDALE, FL. 3	2205
City/State and Zip Code	3303
GHHERMAN@HOTMAIL.C	COM
GHHERMAN@HOTMAIL.C E-mail address: (to be used for future annual repor	t notification)
For further information concerning this ma	atter, please call:
GARY HERMAN	at (954) 561-0002
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	Tananassee, Florida 52514
Enclosed is a check for the follow	ving amount:
\$25 Filing Fee	\$55 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.

Name of the limited liability company:	HFAV LLC	
2. (a) Principal office address of limited liability company:		
(Note: MUST BE STREET ADDRESS)	1901 N. OCEAN BLVD. STE. 12B FORT LAUDERDALE, FL 33305	
(b) Mailing address of limited liability company:		
-[▼]— (<u>Note: MAY BE POST OFFICE BOX</u>)	1901 N. OCEAN BLVD. STE. 12B FORT LAUDERDALE, FL. 33305	
04/05/2004	L040000025731	
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:	NRAI SERVICES INC	
Registered Office Address:	2731 EXECUTIVE PARK DRIVE	
	STE. 4 WESTON, FL 33331	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :		
NEW Registered Agent:	GARY H HERMAN	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1901 N. OCEAN BLVD. STE. 12B	
(MOST BE I LONIDA STREET ADDRESS)	FORT LAUDERDALE ,FL 33305	
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 Efficiency of the members of the limited liability company or as otherwise provided in the article of the article of the limited liability company. Signature of a member or authorized representative of a member I hereby accept the appointment as registered agent and agree to act in this capacity. 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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filled to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change. Signature of Registered Agent		

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