

L04000002613B

ALLURE ACCOUNTING, LLC

28000 Spanish Wells Boulevard
Bonita Springs, Florida 34135

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

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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: PBRD CAMDEN, LLC
2. The mailing address of the limited liability company is : 28000 SPANISH WELLS BLVD
BONITA SPRINGS, FL 33435
3. Date of filing/registration in Florida 04/06/2004
4. Document number L04000026138

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

Angell Corporate Services Inc
Name
One North Clematis Street, Suite 400
Address
West Palm Beach, FL 33401
City, State and Zip

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

ALLURE ACCOUNTING, LLC
Name
28000 SPANISH WELLS BLVD
Florida street address (P.O. Box NOT acceptable)
BONITA SPRINGS FL 33435
City, State and Zip

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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)

JAMES W. AMBURN
(Printed or typed name of signee)

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed 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]
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314