## L04000054367

2004 AUG -9 P 3: 38 <del>- SECR</del>ETARY OF SI TALLAHASSEE, FL (Requestor's Name) (Address) 100039943071 (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL 08/09/04--01055--018 \*\*30.00 (Business Entity Name) (Document Number) Certified Copies \_\_\_ Certificates of Status \_ Special Instructions to Filing Officer.

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## TRANSMITTAL LETTER

FILED
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TO:

Registration Section Division of Corporations

			TAILICRETARY
SUBJECT:	inn	@ Miller LLC.	TALLAHASSEE, FLOR
	(Name of Li	mited Liability Company)	- LOK
The enclosed Articles	of Amendment and fee(s) are sul	omitted for filing	
		-	
Please return all corres	spondence concerning this matter	to the following:	
	Rob	perto Neuberger	
	(8	Name of Person)	
	Act	ive Filings, LLC	
	<del></del>	Firm/Company)	-
	1065	1 NE 11th Court	
,		(Address) 🚜	
	Miami	Shores, FL 33138	
	(City/	State and Zip Code)	
For further information	concerning this matter, please c	call:	
	Roberto Neuberger	at ( 305) 893-98	
·	(Name of Person)	(Area Code & Daytin	ne Telephone Number)
Enclosed is a check for th	ne following amount:		
☐ \$25.00 Filing Fee	\$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee,
. 3 Jazotov i ming i CC	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Taliahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee. Florida 32314

## 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.

Inn /	Milloria I I C
1. The name of the limited liability company is: Inn (	g willer's ELC.
2. The mailing address of the limited liability company	is: 8345 NW 66TH ST #7297, Miami,
FL 33166-2626	
July 22nd, 2004	L04000054367
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the registered of Florida Department of State:	office address as shown on the records of the
Amos Mi	<u></u>
Name 1903 60th PL, su	
Addre	<u> </u>
Brandenton, FL	_ 34203 and Zip
6. The name and address of the new registered agent an	d/or office:
Amos Mil	ler CRECRET ALL ALL ALL ALL ALL ALL ALL ALL ALL AL
8345 NW 66TH	ST #7297  Box NOT acceptable)  ARE
Florida street address (P.O.	Box NOT acceptable)  Box NOT acceptable)
Miami, <sub>FL</sub>	33166-2626
City, State an	
If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company of the limited l	171 1 1 4 4 11 C(1 1 1 1 C(1
Amos Miller	<u></u>
(Printed or typed name of signee)	
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	nd agree to act in this capacity. I further agree to e proper and complete performance of my duties, y position as registered agent as provided for in merely reflect a change in the registered office pany has been notified in writing of this change.
(Signature of Registered Agent)	

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

## 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	•	nn @ Miller's LLC.						
				CT #7	207 1	 Miami		
2. The mailing address of	the limited liability comp	oany is: 0343 197	7 00111	31 #12	197, 1	·		
FL 33166-2626	<del></del>					·		
July 22nd, 2004  3. Date of filing/registration in Florida		L04000	L04000054367					
		4. Document number						
5. The name of the registe. Florida Department of S		ed office address as	shown o	on the re	cords	of the		
-	Amos	Miller						
		ame , suite M2009						
	Brandenton	ldress , FL 34203 ate and Zip	-			_		
6 The name and address of	<b>J.</b>	•						
6. The name and address of the new registered agent and/or office:				SEC	<u> </u>			
	Amos			AR.	<u> </u>			
	8345 NW 66	me TH ST #7297		ASS	100H AUG -9			
•	Florida street address (F	P.O. Box NOT acce	ptable)	FE-P	D	FILED		
	Miami, <sub>I</sub>	<sub>L</sub> 33166-2626		FLOR ATS	ليه	O		
	City, Stat	e and Zip		<b>E</b> E	38			
If the limited liability com confirmed that after the chand the business office of liability company, it is her the members of the limited the operating agreement of the company of the limited that the operating agreement of the company of the limited that the operating agreement of the limited that the company of the limited that the company of the limited liability company of the change of the change of the liability company of the limited the operating agreement of the limited the change of the limited the limited the change of the limited the limi	lange or changes are made the registered agent will be eby confirmed that the chall liability company or as of the limited liability com	a tha Blamda atraat	oddracc.	of the r	ametar	AN ATTION		
Amos Miller	•							
(Printed or typed name of signee)						_		
I hereby accept the appoint comply with the provision and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm (Signature of Registered Agent)	ntment as registered agers of all statutes relative to a comment is being file that the limited liability comment is being file that the limited liability comment is the limited liability comment is the limited liability comment is the limited liability comments.	nt and agree to act it is the proper and confined from the proper and confined from the position as regular to merely reflect a company has been not be a company because the company has been not been not been not because the company has been not be	ALC: N	pacity. erforma agent as in the l n writin	I furti ince of i provi registe g of th	her agree to f my duties, ided for in cred office is change.		

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

INHS18(10/99)

**FILING FEE: \$25.00**