LO 4000065062

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
" (Bu	siness Entity Nar	ne)
(Do	cument Number)	,
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



500130893185

06/10/08--01010--007 **25.00

SECRETARY OF STATE

T. HAMPTON

JUN 1 1 2008

EXAMINER

COVER LETTER

+

3 •
TO: Registration Section
Division of Corporations
SUBJECT: Southpaw, LLC
(Name of Limited Liability Company)
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
- no one los and los a
Please return all correspondence concerning this matter to the following:
Jerry M. Cutrona
(Name of Person)
Southpaw, LLC
(Firm/Company)
• • • •
248 Via Tuscany Loop (Address)
(Addices)
Lake Mary, FL 32746
(City/State and Zip Code)
For further information concerning this matter, please call:
Jerry M. Cutrona at (386) 801-9940
(Name of Person) at (386) 801-9940 (Area Code & Daytime Telephone Numbe
(Nume of Ferson) (New Code & Daytime Ferephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:
Registration Section Registration Section Division of Corporations Division of Corporations
Clifton Building P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32314
Tallahassee, Florida 32301
Enclosed is a check for the following amount:

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: Southpaw,	LLC
2. (a) Principal office address of limited liability compan (<i>Note: MUST BE STREET ADDRESS</i>)	y: 248 Via Tuscany Loop Lake Mary, FL 32746
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	248 Via Tuscany Loop Lake Mary, FL 32746
3. Date of filing/registration in Florida	1. Document number
5. (a) Registered Agent and Registered Office shown on	·
Registered Agent: Registered Office Address:	Jerry M. Cutrona 168 E. Cory Dr. Edgewater, FL 32141 SST. Cory Dr. Edgewater FL 32141
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW Registered Agent</u> :	W Registered Office address:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	248 Via Tuscany Loop Lake Mary,FL 32746
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the charge of confirmed that the change(s) was/were authorized liability/company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	et address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited
Jerry M. Cutrona (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 praint familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited lightly company has been notified.	agree to act in this capacity. I further agree to roper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby the in writing of this change.

(Signature of Registered Agent)