L04000079509

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
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(Business Entity Name)	
(Document Number)	
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C. LEWIS

OCT 2 3 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	~
SUBJECT:	Ashley Glen, LLC
Name	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	ed Office Change and fee(s) are submitted for filing.
Please return all correspondence concern	ing this matter to the following:
Julie Swenson	
Name of Person	
Ashley Glen, LLC	
Firm/Company	
334 East Lake Road, #	172
Address	
Palm Harbor, FL 3468	35
City/State and Zip Code	
julie@jesproperties.co E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this n	natter, please call:
Julie Swenson	at (727) 787-6330
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	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the follo	wing 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.

1. Name of the limited liability company:	Ashley Glen, LLC
2. (a) Principal office address of limited liability	company: Ashley Glen, LLC
(Note: MUST BE STREET ADDRESS)	3281 Landmark Drive Clearwater, FL 33761
(b) Mailing address of limited liability compar	ny: Ashley Glen, LLC
(Note: MAY BE POST OFFICE BOX)	334 East Lake Road, # 172 Palm Harbor, Florida 34685
11/02/2004	L04000079509
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sh	nown on the records of the Florida Dept. of State:
Registered Agent:	JES Properties, Inc
Registered Office Address:	300 State Street E, Suite 222, Oldsmar F
	Oldsmar, FL 34677
(b) Enter name of <u>NEW Registered Agent</u> an <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address: <u>(MUST BE FLORIDA STREET ADDRE)</u>	3281 Landmark Drive
of the members of the limited liability company of or the operating agreement of the limited liability Signature of a member or authorized representative of a member Douglas J. Weiland, MD Printed or typed name of signee	nder the laws of the State of Florida, it is hereby de, the Florida street address of the registered office be identical. Or, in the case of a Florida limited change(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization
(Same)	company has been notified in writing of this change.
Signature of Registered Agent	