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T. HAMPTON

NUV 14 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	·	•	
	000 5		
SUBJECT: Name of	930 Earton, LLC Name of Limited Liability Company		
·			F7
Dear Sir or Madam:			
The enclosed Registered Agent/Registere	d Office C	Change and fee	(s) are submitted for filing.
Please return all correspondence concerni	ing this ma	atter to the follo	owing:
Tom Callahan			
Name of Person			
930 Eaton, LLC			
Firm/Company			
930 Eaton Street, Unit A, 930 E	aton Stre		t e e
Key West, Florida 3304	40		
City/State and Zip Code		v	
TCALL154@gmail.cor E-mail address: (to be used for future annual repo	n ort notification	n)	<u>.</u>
For further information concerning this m	natter, plea	se call:	
Tom Callahan	at (828)	545 5058
Name of Person			& Daytime Telephone Number
STREET/COURIER ADDRESS:		MAILING A	ADDDFSS:
Registration Section		Registration	
Division of Corporations	Division of Corporations		
Clifton Building		P.O. Box 63	
2661 Executive Center Circle			Florida 32314
Tallahassee, Florida 32301		·	
Enclosed is a check for the follo	•		
 √ \$25 Filing Fee	9		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:	930 Eaton, LLC		
2. (a) Principal office address of limited liability company	930 Eaton Street, Unit A		
(Note: MUST BE STREET ADDRESS)	Key West, Florida 33040		
(b) Mailing address of limited liability company:			
(Note: MAY BE POST OFFICE BOX)			
11/3/2004	L-04 0000 79687		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on t			
Registered Agent:	Capital Connection, Inc.		
Registered Office Address:	417 E. Virginia St., Suite 1		
•	Tallahassee, Florida 32301 800-342-8062		
	000-342-0002		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:		
NEW Registered Agent:	Tom Callahan		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	930 Eaton Street, Unit A		
MUST BE I LORIDA STREET ADDRESS	Key West ,FL		
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 of amember or authorized representative of a member Tom Callahan 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 provision of all statutes relative to the provision of my post chapter 608. F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company. Signature of Registered Agent			

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