L04000081106

(Requestor's Name)					
(Ad	(Address)				
,	,				
(Address)					
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	MAIT	MAIL			
_	— .	_			
(Business Entity Name)					
(Do	cument Number)				
Codified Conice	Contitionto	of Ctatus			
Certified Copies	_ Certificates	or Status			
Special Instructions to	Filing Officer:				
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Office Use Only



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SECRETARY OF STATE OF STATE OF CORPORATIONS
ON ASSOCIATE OF CORPORATIONS
ON AUG -8 -PM-1: 25

J. BRYAN

AUG 11 2008

EXAMINER

· COVER LETTER

TO: .	Registration Section Division of Corporations				
SUBJ	ECT: PRECO LLC (Name of	Limited Li	ability Company)	_	Đ
Dear S	Sir or Madam:				
The er	nclosed Registered Agent/Registered Off	ice Change	e and fee(s) are submitted for filing.		
Please	return all correspondence concerning th	is matter to	o the following:		
Kymbe	rleigh Scott Britt				
	(Name of Person)				
PRECO) LLC			0	<u>=</u>
	(Firm/Company)	·		⇔	13.EV
				SUV	윤
4371 N	lorthlake Blvd #120			8-	F F
	(Address)		·	곮	Y OF
		•	·		SIA SIA
Palm E	Beach Gardens, FL 33410	 · · · · ·	_	22	SNOL
	(City/State and Zip Code)				S
For fu	rther information concerning this matter.	, please cal	I:		
Kymbe	rleigh Scott Britt	at (<u>561</u>) 662-1867		
	(Name of Person)	(Area	Code & Daytime Telephone Number)		
€, ¥	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314		
	Enclosed is a check for the following	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: PRECOLL	<u>.C</u>
2. (a) Principal office address of limited liability compan	ry: 4371 Northlake Blvd #120
(Note: MUST BE STREET ADDRESS)	Palm Beach Gardens, FL 33410
(b) Mailing address of limited liability company:	4371 Northlake Blvd #120
(Note: MAY BE POST OFFICE BOX)	Palm Beach Gardens, FL 33410
	08 555
	E ZEE
November 8th 2004	L04000081106
3. Date of filing/registration in Florida	4. Document number
	A Open
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Corporate Creations Network Inc
Registered Agent.	Colporate Creations Network inc
Registered Office Address:	11380 Prosperity Farms Road #221E
	Palm Beach Gardens, FL 33410
	United States
AND THE CONTROL OF THE STATE OF	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	Kymberleigh Scott Britt
NEW Decision of Office Addison	4274 Northlaka Blad #420
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	4371 Northlake Blvd #120
MOST BET BORDET STREET (IDDINGS)	Palm Beach Gardens #,FL 33410
If the limited liability company is not organized under the	Java of the State of Florids, it is hereby confirmed
that after the change or changes are made, the Florida stre	et 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 liability company or as otherwise provided in the articles	of organization or the operating agreement of the
limited liability company.	or organization, or and operating agreement at the
A KILLING TO THE	
(Signature of Framember or authorized representative of a member)	
Kymberleigh Scott Britt KATHY BRITT	
(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 roper and complete performance of my duties, and I
am familiar with and accept the obligations of my position	n as registered agent as provided for in Chapter 608,
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pam 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 liability company has been notificed.	ed in writing of this change.
(Signature of Registered Agent)	

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

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