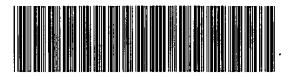
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(5)							
(Requestor's Name)							
		•					
(Address)							
(Address)							
(Cit	y/State/Zip/Phone	e #)					
PICK-UP	WAIT	MAIL					
/Ru	siness Entity Nar	na)					
ua)	Siness Entity Nar	ne)					
(Do	cument Number)						
Certified Copies Certificates of Status							
Special Instructions to	Filing Officer:						
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Office Use Only



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SECRETANT OF STATE

J. HARRIS

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	Vina Del Mar Thoroughbreds, LLC					
		Name of Limited Liability Company				
Dear Si	r or Madam:					
The end	closed Registered Agent/Registered Off	ice Change	and fee(s) are submitted for filing.			
Please	return all correspondence concerning th	is matter to	the following:			
Richa	rd Q. Boylan					
	Name of Person					
Vina [Oel Mar Thoroughbreds, LLC					
	Firm/Company					
316 1	3th Avenue North					
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Address					
St Pet	ersburg, FL 33701					
	City/State and Zip Code					
RQBo	ylan@yahoo.com		·			
Е	mail address: (to be used for future ann	ual report n	otification)			
For fun	her information concerning this matter,	please call:				
Richa	rd Q. Boylan	727 at (	363-6727			
	Name of Person		Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS:		MAILING ADDRESS:			
	Registration Section		Registration Section			
	Division of Corporations Clifton Building		Division of Corporations P.O. Box 6327			
	2661 Executive Center Circle		Tallahassee, Florida 32314			
	Tallahassee, Florida 32301					
Enclosed is a check for the following amount:						
	<b>2</b> \$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 605.0114 or 605.0116, 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.

I. Na	ame of the limited liability company: Vina Del Mar	Thoro	ughbreds,	LLC		
2. (a)	316 13th Avenue North	(	_{b)} 316 13tl	h Avenue N	orth	
. (u) .	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	`		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	St Petersburg, FL 33701		St Peter	sburg, FL 3	3701	
	01/04/2005		L0500000	01143		
3.	Date of filing/registration in Florida	4.		Document nu	ımber	
5. (a)	Richard Q. Boylan		à.			
()	Registered Agent and Registered Office shown on the records of	the Floric	a Dept. of State	- e:		
	2950 Alton Drive					
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES	<u>s)</u>	-		
	St Pete Beach , FI	33706	}	<del>-</del>	TALLAS AUG	
<b>(L)</b>						
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office a	ddress:	-		
	316 13th Avenue North					
	NEW Registered Office Address:				56 <b>- F</b>	
	St Petersburg	33701		-		
he cha agent v was/we he art	imited liability company is not organized under the launge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of the organization or the operating agreement of the	ws of the fine the fine the fine the line the li	e State of Floistered office company, it in	e and the busing shereby confing company or npany.	ness office of the registere rmed that the change(s) as otherwise provided in	
I hava	ture of a member or authorized representative of a member by accept the appointment as registered agent and ag	ree to a	et in this can	acity I furthe	d name of signee er agree to comply with the	
provisi he obi o mer otifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I din writing of this change.	perform d for in hereby	nance of my Chapter 602 confirm that	duties, and I a 5, F.S. Or, if to the limited lia	im familiar with and accep his document is being filed bility company has been	
Signatu	re of Registered Agent					

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