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GIVISION OF CORPORATIONS

08 OCT -6 PM 2: 41

J. BRYAN
OCT -7 2008
EXAMINER

INHS18 (5/08)

TO: Registration Section Division of Corporations		
SUBJECT: SOUTHERN COMFORT L. (Name of L.	L.C. imited Liability Company)	•
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
EDWARD USMAR		
(Name of Person)		
SOUTHERN COMFORT L.L.C.		OB OCT
(Firm/Company)		CT - SET -
1641 SW 56th Ave		-6 F
(Address)	West to the Control of the Control o	POR A
		OF STATION DRPORATION PM 2: 41
Plantation, FL 33317		S
(City/State and Zip Code)		
For further information concerning this matter, p	please call:	
EDWARD USMAR 81	(305) 586-0090	
(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	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following a	mount:	
☑ \$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: SOUTHE	ERN COMFORT L.L.C.
2. (a) Principal office address of limited liability com (Note: MUST BE STREET ADDRESS)	pany: 1641 SW 56th Ave Plantation, FL 33317
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1641 SW 56th Ave Plantation, FL 33317
	98 00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
01/24/05	L05000007484
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shows	n on the records of the Florida Dept. of State:
Registered Agent:	EDWARD USMAR
Registered Office Address:	1874 NW 74TH WAY PEMBROKE PINES, FL 33024
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	NEW Registered Office address: EDWARD UŞMAR
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1641 SW 56th Ave
March App 1 Bottom 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PLANTATION,FL 33317
that after the change or changes are made, the Florida	the laws of the State of Florida, it is hereby confirmed street address of the registered office and the business the case of a Florida limited liability company, it is zed by an affirmative vote of the members of the limited cles of organization or the operating agreement of the
EDWARD USMAR (Printed or typed name of signee)	
I hereby accept the appointment as registered agent of comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my post F.S. Or, if this document is being filed to merely reflections that the limited liability company has been not be a sufficient with the limited liability company has been not be a sufficient with the limited liability company has been not be a sufficient with the limited liability company has been not be a sufficient with the limited liability company has been not be a sufficient with the limited liability company has been not be a sufficient with the limited liability company has been not be a sufficient with the limited liability with li	and agree to act in this capacity. I further agree to he proper and complete performance of my duties, and I sition as registered agent as provided for in Chapter 608 act a change in the registered office address, I hereby otified in writing of this change.
(Signature of Registered Agent)	

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