## 10500009333

(Reque	stor's Name)		
. (Addres	s)		
/A +	-1		
(Addres	s)		
(City/Sta	ate/Zip/Phone #	<i>‡</i> )	
	·		
PICK-UP	WAIT	MAIL	
(Busine	ss Entity Name	)	
	,		
(Docum	ent Number)	<u> </u>	
Certified Copies	Certificates of Status		
<b></b>			
Special Instructions to Filing	g Officer:		

Office Use Only



100135276591

09/08/08--01051--017 \*\*25.00



M. THOMAS

SEP - 9 2008

EXAMINER

## **COVER LETTER**

<b>TO:</b> Registration Section Division of Corporations			
SUBJECT: Alda Properties		. 0	
(Name	e of Limited Liability Company)		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.		
Please return all correspondence concernin	g this matter to the following:		
Susan Kumpe			
(Name of Person)			
Kyler, Kohler, & Ostermiller, LLP	:	286 387 387 387 387 387 387 387 387 387 387	
(Firm/Company)		黑哥	<b>T</b>
856 South Sage Drive, Suite 300		OB SEP -8 FR LE CORIDI	品品
(Address)		FLORIES TO	<u>"</u>
Cedar City, Utah 84720		Sm o	⊃.
(City/State and Zip Code)			
For further information concerning this man	tter, please call:		
Susan Kumpe	at ( 435 ) 586-9366		
(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	ng amount:		
☐ \$25 Filing Fee	☐ \$55 Filmg 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 Floridă. 1. Name of the limited liability company: Alda Properties 2. (a) Principal office address of limited liability company: 6145 Oakbury Lane (Note: MUST BE STREET ADDRESS) Suwanee, Georgia 30024 (b) Mailing address of limited liability company: 6145 Oakbury Lane (Note: MAY BE POST OFFICE BOX) Suwanee, Georgia 30024 January 28, 2005 .05000009333 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State; Registered Agent: Jack Callahan Registered Office Address: 451 Central Park Drive Largo, Florida 33771 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: **NEW** Registered Agent: InCorp Services, Inc. **NEW Registered Office Address:** 17888 37th Court North (MUST BE FLORIDA STREET ADDRESS) Loxahatchee FL 33470 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 a momber of escutative of a member) Alanson H. Leland (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 comply with the provisions of all statues relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

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

INHS18 (05/08)

fignature of Registered Agent)