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## **COVER LETTER**

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Division of Corporations SUBJECT: RICHARD BOWDEN, LLC (Name 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 concerning this matter to the following: MICKEY BARKETT, ESQ. (Name of Person) 320 EAST SOUTH STREET, SUITE 180 (Address) ORLANDO, FLORIDA 32801 (City/State and Zip Code) For further information concerning this matter, please call: at (407 ) 403-6429 (Area Code & Daytime Telephone Number) MICKEY BARKETT, ESQ. (Name of Person)

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 amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

TO:

Registration Section

## 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 boin, in the State of Florida.

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1. The name of the limit	ed liability company is: R	RICHARD BOWDEN, LLC	·
2. The mailing address of	of the limited liability comp	pany is: 2614 NORTH TAMIAN	/II TRAIL PMB 203
NAPLES, FLORIDA 34	1108	<u> </u>	
1/21/2005		L05000010602	
3. Date of filing/registra	tion in Florida	4. Document number	
Florida Department of	MARC F. OATES,  MARC F. OATES,  N  10001 TAMIAMI TR.  Ac  NAPLES, FLORIDA  City, States  of the new registered ager  MICKEY BARKETT  Nar  320 EAST SOUTH S	Name AIL NORTH, SUITE 119 Iddress 34108 ate and Zip int and/or office: , ESQ. me	FILED  SED SANT A SIME TALLARASSUE FLORIDA

ORLANDO, FL 32801

City, State and Zip

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 member or authorized representative of a member)

RICHARD BOWDEN

(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 statutes 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.

(Signature of Registered Agent)

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