W5000012757

Bonnie Bortlett Jonson (Requestor's Name) (Address) (Address) (Address) (Address) (Address) (City/State/Zip/Phone #)	100048133401
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MJH :

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. The name of the limite	d liability company is:	Bartco, LLC	
		npany is : 25 Thorndike F	load
North Andover, MA 018			*
February 08, 2005	V · · · · · · · · · · · · · · · · · · ·	L050000127	·
3. Date of filing/registrati	on in Florida	4. Document m	
5. Date of Imagacglattati	on in Florida	4. Document in	Miloci
5. The name of the registe Florida Department of S	red agent and the registe	red office address as shown	on the records of the
riorida Deparanem di i	Robert Bartlett Jr		
	720 Tam O'Shanter	Name Ave	<u> </u>
		ddress	<u> </u>
	City, S	tate and Zip	-
6. The name and address of	of the new registered age	nt and/or office:	05 APR
	Dale Brewster, Attor	ney At Law	5
	3860 Sun City Cente	ame r Blvd	2
•	Florida street address	P.O. Box NOT acceptable)	
	Sun City Center,	FL 33573	85 D
	City, Sta	te and Zip	-
confirmed that after the ch and the business office of liability company, it is her	ange or changes are mathe registered agent will eby confirmed that the call liability company or as fithe limited liability confirmed that the confirmed that the confirmed liability liab	otherwise provided in the anpany.	s of the registered office e of a Florida limited ed by an affirmative vote of
Bonnie Bartlett Janson			
(Printed or typed name of signee)			•
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm Del Chapter of Registered Agent)	ntment as registered ages of all statutes relative of all statutes relative of accept the obligations his document is being fil that the limited liability	nt and agree to act in this of the proper and complete of my position as registered to merely reflect a chang company has been notified	apacity. I further agree to performance of my duties, agent as provided for in e in the registered office in writing of this change,

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)

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