

**FILED**  
**Apr 30, 2007 08:00 AM**  
**Secretary of State**



\_\_\_\_\_

04092007 No Chg-LLC CR2E083 (11/05)

4. FEI Number <b>35-2247323</b>	Applied For
	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

U00000743876  
05/15/07-80125-020 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Andrew W. Goetz Andrew W. Goetz 9 APR 07 (772) 359-7206  
SIGNATURE AND TYPED OR PRINTED NAME OF BORROWING-MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #