## L0500011699

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PICK-UP WAIT MAIL		
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C. LEWIS

MAY 2 1 2013

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Daake Family 1745+ 125, 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:		
Thomas 6. Dagke Sr. Name of Person		
Danke Family Trust 25, LLC Firm/Company		
11 Village Beach Road West		
Santa Rosa Deach, FL 32459 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Name of Person at (314) 401 – 1400  Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building Clifton Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		

□ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

Enclosed is a check for the following amount:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.5 liability company submits the following statement in order agent, or both, in the State of Florida.	08, Florida Statutes, the undersigned limited r to change its registered office or registered
1. Name of the limited liability company:	Family Trust 125, LLC
2. (a) Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	Sent Dage Beach Road Was
(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	11 Village Beach Road West Santa Rosa Beach, FL 32459
02/17/2005	LO 50000 16699
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	Thomas O. Daake, Sr.
Registered Office Address:	125 Village Beach Road West Santa Rosa Beach, FL 32455
(b) Enter name of <b>NEW Registered Agent</b> and/or <b>NEV</b>	N Registered Office address:
NEW Registered Agent:	16 change
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5enta Rose Beach Road Wast  Senta Rose Beach FL 32459
If the limited liability company is not organized under the I confirmed that after the change or changes are made, the FI and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company.	aws of the State of Florida, it is hereby orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of se provided in the articles of organization or
Signature of a member or authorized representative of a member	
Printed or typed name of signee	<del>-</del>
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my po. Chapter 608, F.S. Op. if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to sper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office whas been notified in writing of this change.
Signature of Registered Agent	<b>3 3 3 3 3 3 3 3 3 3</b>
Division of Corporations, P.O. Box 63: FILING FEE: \$2	
INH\$18 (05/08)	