L05000030358

(Reques	tor's Name)
, (Address	5)
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(City/Sta	te/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busines	ss Entity Name)
(Docume	ent Number)
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ADORNO & YOSS A LIMITED LIABILITY PARTNERSHIP

350 EAST LAS OLAS BOULEVARD, SUITE 1700 FORT LAUDERDALE, FLORIDA 33301-4217 PHONE: (954) 763-1200, Fax: (954) 766-7800 WWW.ADORNO.COM

MICHAEL L. TROP

DIRECT LINE: (954) 766-7802 DIRECT FAX: (954) 766-7800

EMAIL: MTROP@ADORNO.COM

June 5, 2008

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

> Serfer Realty, LLC Re:

Document No. L05000030358

Gentlemen:

We enclose the following documents for filing:

- Cover letter and resignation of member, managing member manager from Florida or foreign limited liability company.
- Cover letter and statement of change of registered office or registered agent or both for limited liability company.

Also enclosed is a check for \$50.00 payable to the Department of State.

Please acknowledge receipt by stamping the enclosed copy of this letter and return it to me in the enclosed stamped, self-addressed return envelope.

wheel LT MAD

Michael L. Trop

MLT/efl **Enclosures**

CALIFORNIA FLORIDA GEORGIA NEW JERSEY NEW YORK TEXAS WASHINGTON, D.C. ILLINOIS MASSACHUSETTS MLT/203541.0001/N0713076 1

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CALIFORNIA FLORIDA GEORGIA ILLINOIS MASSACHUSETTS NEW JERSEY NEW YORK TEXAS WASHINGTON, D.C.

MLT/203541.0001/N0713076_1

COVER LETTER

Division of Corporations			
SUBJECT: Serfer Rea	lty, LLC		
	Name of Limited Liability Company)		
Dear Sir or Madam:			
The enclosed Registered Agent/Regist	tered Office Change and fee(s) are submitted for filing.		
Please return all correspondence conc	erning this matter to the following:		
·			
Michael L. Trop, Esq.			
(Name of Person)	,		
Adorno & Yoss LLP	Po m		
(Firm/Company)	TECA H		
350 East Las Olas Bou	levard, 17th Floor		
(Address)	E.F.C.		
Fort Lauderdale, FL 33			
(City/State and Zip Code)			
For further information concerning thi	s matter, please call:		
Michael L. Trop	at (954)766-7802		
(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	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the fo	llowing amount:		
\$25 Filing Fee			

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: _	Serfer Realty,	LLC	
2. The mailing address of	f the limited liability com	pany is: 6448 Pembr	oke Road,	
		Hollywood,	FL 33023	
March 28, 2005		L05000030	358	
3. Date of filing/registration	ion in Florida	4. Document nu	ımber	
5. The name of the register Florida Department of S	ered agent and the register State:	red office address as shown	on the records	of the
-	Eric S. Serf	er		
	6448 Pembrok	lame ce Road		
	Ac Hollywood, F	ldress FL 33023	TALL SECT SECT	-17
City, State and Zip				CONTRACTOR OF THE PERSON OF TH
6. The name and address of	of the new registered ager	nt and/or office:	JUN 17 P CAHASSEE, FL	
	Gregory T. S	Serfer	T 70	0
	Na 6448 Pembrok		E 43	
	Florida street address (I	P.O. Box NOT acceptable)	<i>≫</i>	
	Hollywood _I	FL 33023		
	City, Stat	e and Zip		
If the limited liability com confirmed that after the ch and the business office of liability company, it is her of the members of the lim or the operating agreemen (Signature of a member of authorized)	ange or changes are mad the registered agent will leby confirmed that the chited liability company or t of the limited liability confirmed that the chited liability confirmed liability liability confirmed liability l	der the laws of the State of e, the Florida street address be identical. Or, in the case nange(s) was/were authoriz as otherwise provided in thompany.	Florida, it is here sof the registere of a Florida lined by an affirmate articles of org	reby ed office mited ative vote ganization
Gregory T. Serf	er			
(Printed or typed name of signee)				
I hereby accept the appoing comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm	ntment as registered ager s of all statutes relative to l accept the obligations o his document is being file that the limited liability c	nt and agree to act in this co the proper and complete to f my position as registered d to merely reflect a chang ompany has been notified t	apacity. I furth performance of a gent as provide e in the register in writing of this	er agree to my duties, led for in ed office s chänge.
(Circolana of Carlotta Line)	1	_		
(Signature of Registered Agent)				
Division	•	Box 6327, Tallahassee, Fl FEE: \$25.00	L 32314	

INHS18 (8/05)