

L05000040246

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300157051033

06/12/09--01075--013 \*\*25.00

FILED  
09 JUN 12 AM 10:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR  
JUN 16 2009  
EXAMINER



**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. Name of the limited liability company: ZAMIN INVESTMENTS, LLC

2. (a) Principal office address of limited liability company: 190 SW PALM COVE DRIVE

(Note: MUST BE STREET ADDRESS) PALM CITY, FL 34990

(b) Mailing address of limited liability company: \_\_\_\_\_

(Note: MAY BE POST OFFICE BOX) \_\_\_\_\_

4/21/2005  
3. Date of filing/registration in Florida

L05000040246  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: RAM S. ARYA

Registered Office Address: 210 SW WHITEWOOD DRIVE  
PORT ST LUCIE, FL 34953

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent: RAM S. ARYA

NEW Registered Office Address: 190 SW PALM COVE DRIVE  
(MUST BE FLORIDA STREET ADDRESS) PALM CITY, FL 34990

FILED  
JUN 12 AM 10:31  
TALLAHASSEE, FLORIDA

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.

Ram S. Arya  
Signature of a member or authorized representative of a member

RAM S ARYA  
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**