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K.SALY EXAMINER OCT 25 2012



ACCOUNT NO. : 12000000195		
REFERENCE : 385875 7385507		
AUTHORIZATION: Spulle Ren		
COST LIMIT : \$ 25.00		
ORDER DATE: October 18, 2012		
ORDER TIME : 4:0 PM		
ORDER NO. : 385875-018		
CUSTOMER NO: 7385507		
CHANGE OF AGENT		
NAME: ORMOND BEACH MMR, LLC		
WAND. ORNOWD BEACH PRINC, DDC		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY XX PLAIN STAMPED COPY		
CONTACT PERSON: Stephanie Milnes EXT# 52920		
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: ORMOND BE	EACH MMR, LLC	
 (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) 	y: <u>1750 N Florida Mango Road</u> Suite 103	
	West Palm Beach, FL 33409	
(b) Mailing address of limited liability company:	1750 N Florida Mango Road	
(Note: MAY BE POST OFFICE BOX)	Suite 103 West Palm Beach FL 33409	
	유유 글 모	
05/19/2005	L05000049975	
3. Date of filing/registration in Florida	L05000049975 75 5	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	Bloome, Gary	
Registered Office Address:	1750 N Florida Mango Road, Suite 103 West Palm Beach, FL 33409	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	W Registered Office address: Corporation Service Company	
		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
	Tallahassee ,FL 32301	
If the limited liability company is not organized under the lithat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized bliability company or as otherwise provided in the articles of limited liability company.	t address of the registered office and the business ase of a Florida limited liability company, it is by an affirmative vote of the members of the limited	
(Signature of a member or authorized representative of a member)	_	
(Printed or typed name of signer) (Printed or typed name of signer)	***	
(Printed or typed name of signee)	TIVE	
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.		
By: (Signature of Regardered Agent Corporation Service Company		
(Signature of Registered Agent) Corporation Service Company	Sylvia Queppet, Asst. Vice President	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00