## LD5000052402

(Re	equestor's Name)	_
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(Cit	ty/State/Zip/Phone	e #)
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SECRETARY OF STATE
ANE CHARASSEE. FLORIDI

C. LEWIS

JUL 2 8 2009

EXAMINER

## COVER-LETTER -

TQ;	Registration Section	÷	
	Division of Corporations		
SHRI	ECT: Ocean Avenue, LLC.		
<b>БО</b> В0		Limited Liability Company	
		,	
Dear	Sir or Madam:		
The e	nclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
DI		a dhia maddan ta dha fallannina.	
Please	e return all correspondence concerning	g this matter to the following:	
Edwa	rd D. Adkins		
	Name of Person		
0cea	n Avenue, LLC		
	Firm/Company		
1505	1 South Tamiami Trl., Ste # 2	03	
	Address		
Fort	Myers, Florida 33908		
	City/State and Zip Code		
N/A			
E	-mail address: (to be used for future annual report	notification)	
For fi	urther information concerning this ma	tter please call	
r or it	itue momation concerning and ma	ner, please can.	
Edw	ard D. Adkins	at (_239) _466-7737	
	Name of Person	Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS:	MAILING ADDRESS:	
	Registration Section	Registration Section	
	Division of Corporations	Division of Corporations	
	Clifton Building	P.O. Box 6327	
	2661 Executive Center Circle	Tallahassee, Florida 32314	
	Tallahassee, Florida 32301		
	Enclosed is a check for the follow	ing amount:	
		<u> </u>	
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

## 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: Ocean Avenue	e, LLC
2. (a) Principal office address of limited liability company	: 15051 South Tamiami Trl, Ste# 203
(Note: MUST BE STREET ADDRESS)	Fort Myers, Florida 33908
(b) Mailing address of limited liability company:	15051 South Tamiami Trl, Ste# 203
(Note: MAY BE POST OFFICE BOX)	Fort Myers, Florida 33908
05/25/2005	L05000052402
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 Deptrof State:
Registered Agent:	Hahn, Loeser Parks, LLP & &
Registered Office Address:	Fort Myers, Florida 33902 US
NEW Registered Agent:  NEW Registered Office Address:  (MUST BE FLORIDA STREET ADDRESS)	Adkins, Melody R  15051 South Tamiami Trl., Ste# 203-H Fort Myers, Florida 33908  FL
If the limited liability company is not organized under the l confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	aws of the State of Florida, it is hereby
Edward D. Adkins Printed or typed name of signee	· -
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provisions of all statutes relative to the provisions of my post chapter (108, 18, 5). Or, if this document is being filed to mei address I have by confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the feetistered office has been notified in writing of this change.
Division of Corporations, P.O. Box 632	Tallahamaa El 20214 m 📉
FILING FEE: \$2	