## L05000059822

HARMONEY LLC (Requestor's Name)					
1950 NORTH POINT BLVD. #10					
(Address)					
TALLAHASEE, FL 32308 (City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

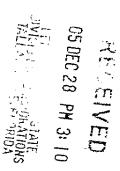
Office Use Only



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## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJ		RMONEY LL f Limited Liabilit		<u> </u>	
Dear	Sir or Madam:				
The e	nclosed Registered Agent/Registered	l Office Change a	and fee(s) are submi	tted for filing.	
Please	e return all correspondence concernir	ng this matter to t	he following:		
ALE	RIS ERVIN		_	Tre C	
	(Name of Person)			05 D	
HAF	RMONEY LLC (Firm/Company)	······································	<del>-</del>	DEC 28 LAHASSE	
1950	) NORTH POINT BLVD. # 1	103		PH 3: 39 OF STATE	
	(Address)		-	RID.	
TALL	_AHASSEE, FL 32308 (City/State and Zip Code)				
For fu	rther information concerning this ma	atter, please call:			
ALE	RIS ERVIN	at ( <u>850</u>	) <b>294-0422</b>		
	(Name of Person)	()	Area Code & Daytir	ne Telephone Number)	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
	Enclosed is a check for the follow	ing amount:			
	\$25 Filing Fee \$\times \text{S55 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. The name of the limited liability company is: HARMONEY LLC 2. The mailing address of the limited liability company is: 1950 NORTH POINT BLVD. #103 TALLAHASSEE, FL 32308 06/16/05 L05000059822 3. Date of filing/registration in Florida 4. Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: ZSANELL L. SMITH Name 1950 NORTH POINT BLVD. #103 Address TALLAHASSEE, FL 32308 City, State and Zip 6. The name and address of the new registered agent and/or office: **ALERIS ERVIN** Name 1950 NORTH POINT BLVD. #103 Florida street address (P.O. Box NOT acceptable)

TALLAHASSEE, FL 32308

City, State and Zip

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.

(Signature of a member or authorized representative of a member)

## CHARLES ERVIN JR.

(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)