L05000060754

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(Address)		
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J. BRYAN
MAR 1 3 2012
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: BARCLAY HOLDINGS. Name of Limite	LLC ed Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
PETER C TAAFFE Name of Person BARCLAY HOLDINGS LLC		
HOLDINGS, LLC Finn/Company 4550 Post Oak Place, #220 Address	2012 HAR 12 PH 1:41 SECRETARY OF STATITUTE AND SEE. FLORI	
Hausion, Tx 77027 City/State and Zip Code	FLORIDA	
Ptaaffe @taaffecpa.com E-mail address: (to be used for future annual report notification)	ion)	
For further information concerning this matter, ple	ease call:	
	713 840-9696	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations	
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following am	ount:	
\$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: BAREL	AY HOLDINGS LLC
2. (a) Principal office address of limited liability company	y: 4550 POST OAK PL, # 120
(<u>Note: MUST BE STREET ADDRESS</u>)	HOUSTON, Tx 77027
(b) Mailing address of limited liability company:	(SAME)
(Note: MAY BE POST OFFICE BOX)	
6-17-2005	L05000060754 3
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Depte of State
Registered Agent:	PATRICK RINKA
Registered Office Address:	ORLANDO, FL 32801 25
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	DAVID MCLEOD
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1511 EAST S.R. 434, #3001 WINTER SPRINGS, ,FL32708
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Peter C. Taaffe Printed or typed name of signee	Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization

Signature of Registered Agent

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 his 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.