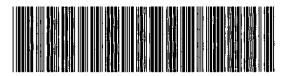
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EXAMINER

## **COVER LETTER**

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☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	
Enclosed is a check for the following	ng amount:	
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	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Rae Franks, Esquire	at (561) 820-9177	
For further information concerning this mat	ter, please call:	
(City/State and Zip Code)	<del></del>	
West Palm Beach, FL 33401-5637		
224 Datura Street, Suite 900 (Address)	~ · · · · · · · · · · · · · · · · · · ·	
Rae Franks, Esquire P.A.  (Firm/Company)		
Des Seeds Seeds DA		
Rae Franks, Esquire (Name of Person)		
Please return all correspondence concerning	g this matter to the following:	
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Dear Sir or Madam:		
SUBJECT: DDP Florida Investmen (Name	of Limited Liability Company)	
TO: Registration Section Division of Corporations		

## 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.

<b></b>	
1. Name of the limited liability company: DDP Floric	da Investments, LLC
<ol> <li>(a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)</li> </ol>	ny: 127 Peruvian Avenue Apt 304 Palm Beach FL 33480
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	One New Hampshire Avenue #125 Portsmouth NH 03801
06/21/2005	L05000061159
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:
Registered Agent:	Rae Franks, Esq.
Registered Office Address:	312 Ninth Street West Palm Beach, Fl. 33401 US
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:
NEW Registered Agent:	Rae Franks, Esquire
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Rae Franks, Esquire P.A.  224 Datura Street, Suite 900  West Palm Beach  F,FL 33401-5637
If the limited liability company is not organized under the that after the change or changes are made, the Florida strooffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.  (Signature of a member or authorized representative of a member)	eet address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited
DAVID T. DAY (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pan familiar with and accept the obligations of my position in the confirmation of the confirmation of the limited liability company has been notification of Registered Agent)  Division of Corporations, P.O. Bo	oroper and complete performance of my duties, and long as registered agent as provided for in Charles 698, a change in the registered office address, I have by some led in writing of this change.
FILING FE	