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(Re	equestor's Name)	.
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	<u> </u>
Copies	_ Certificates	of Status
	(Ad (Cit	(Business Entity Nar (Document Number)

Special Instructions to Filing Officer:

L. SELLERS

JAN 2 6 2009

EXAMINER

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Premier Properties, L (Nat	me of Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	ed Office Change and fee(s) are submitted for filing.
Please return all correspondence concerr	ning this matter to the following:
Amanda M. Bunso (Name of Person)	
Primier Properties (Firm/Company)	, uc.
925 Butter Daks (Address)	<u>Ct.</u>
(City/State and Zip Code)	_34787
For further information concerning this	natter, please call:
Amada Bunson (Name of Person)	at (<u>UA) UA) 9004</u> (Area Code & Daytime 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 follo	owing amount:
\$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.

in the state of Piortaa.	
1. Name of the limited liability company: Premier Pro	operties, LLC.
2. (a) Principal office address of limited liability compan (<i>Note: MUST BE STREET ADDRESS</i>)	y: <u>925 Butter Oals Ct.</u> <u>Winter Barden, FL 34787</u>
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	925 Batter Oaks Ct. Winter Gorden, Fl. 34787
7/17/2005	L0500070052
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Amanda M. Benson
Registered Office Address:	925 Butter Dals Ct. Winter Barden, FL 34787
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	
NEW Registered Agent:	-SAME - Amarda M. Bunson
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	925 Butter Daks Ct. Winter Gorden FL 24787
If the limited liability company is not organized under the that after the change or changes are made, the Florida stre office 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)	et address of the registered office and the business case of a Florida limited liability company, it is
Amanda bunson (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 plan familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm/that the limited liability company has been notified.	
(Signature of Registered Agent)	O9
Division of Corporations, P.O. Bo	· · ·

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