## LOS 0000 74188

(Requestor's Name)
(Address)
(Address)
(1.0.000)
(A) (A) (A)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodinont Hambol)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
,

Office Use Only



000128486770

05/05/08--01064--020 ++55.00

2000 MAY -5 PM 1: 03
SECRETARY OF STATE
TALLAHASSEE, FLORID

T. CLINE

MAY - 6 2008

**EXAMINER** 

## **COVER LETTER**

Division of Corporations				
SUBJECT: KIDI'S LAND L.L.C.				
	Limited Liability Company)	_		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for f	iling.		
Please return all correspondence concerning	g this matter to the following:			
Betty Dal Bon				
(Name of Person)	<del></del> ,	,		
KIDI'S LAND L.L.C.		,		
(Firm/Company)	<del></del>	7 S		
1460 Gemini Blvd. Unit 11	· ·	2008 HAY -5 ZECRETARY TALLAHASSI		
(Address)		Y-5 PM		
Orlando, FL 32837		5 PM 1: 03 SEE. FLORID		
(City/State and Zip Code)	<u> </u>	H 1: 03		
For further information concerning this matt	ter place call:	7		
To runtie information concerning this mate	ter, prease carr.			
Franco Dal Bon	at (407 ) 758-0126	_		
(Name of Person)	(Area Code & Daytime Telepi	hone 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 following	ng amount:			
\$25 Filing Fee				

## 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 limit	ted liability company is:	KIDI'S LAND L	.L.C.		
2. The mailing address	of the limited liability co	ompany is : 14	60 Gemini Blvd. U	nit 11	
Orlando, FL 32837	<del></del>				
July 25, 2005		I	L05000074188		
3. Date of filing/registra	ition in Florida	$\overline{4}$	. Document numb	per	
5. The name of the regist Florida Department of	tered agent and the regist f State:	stered office ad	ldress as shown or	the records of the	
	Betty Dal Bon				
		Name			
	13207 Chattanoo	ga Lane			
		Address			
	Orlando, FL 3283				
	City,	State and Zip			
6. The name and address	of the new registered a	gent and/or off	ice:		
	Betty Dal Bon			-1 22	
		Name		2008 MAY SECRET TALLAHI	na stration
	1460 Gemini Blvd. U		<u> </u>	AR F	2 6
	Florida street address	s (P.O. Box <b>N</b> O	OT acceptable)	102	The same of
	Orlando,	FL 32837		S F	\$1.5°
	City, S	State and Zip		PM -	A CHANGE
If the limited liability conconfirmed that after the cand the business office of liability company, it is had of the members of the life or the operating agreement (Signature of a member or author)	change or changes are median the registered agent we ereby confirmed that the mited liability company ent of the limited liability	nade, the Florid ill be identical. change(s) was or as otherwis y company.	la street address of Or, in the case of	f the registered office f a Florida limited	e ote on
Betty Dal Bon					
(Printed or typed name of signed	e)				
I hereby accept the apportunity with the provision and I am familiar with all Chapter 608, F.S. Or, if address, I hereby confirm (Signature of Registered Agent)	nintment as registered as ns of all statutes relative ad accept the obligation this document is being in that the limited liability.	gent and agree e to the proper is of my positio filed to merely ty company has	to act in this cape and complete per, n as registered ag reflect a change it s been notified in v	acity. I further agre formance of my duti ent as provided for i n the registered offic writing of this chang	e to es, n e e.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00