L0500019449

SHARIF KHAN			
SHARIF KHAN 1209 S. Drange Blosson Trail ORLANDO FL 32809			
ORLANDO ,FL 32809			
(Address)			
(City/State/Zip/Phone #)			
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(Business Entity Name) (Document Number)			
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SECRETARY OF STATE
SECRETARY OF STATE

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: SS Sobo	annola LLC
2.	(a) Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	14: Sobahnsh Sutes 12:08 S- Chause Blossom Tw Orlando Fl 32505
	(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Sabanian Sules 5 10 BOX 1456 LI. C. NY 111065 6
_	08/12/2005	4050000 79449
3.	Date of filing/registration in Florida	4. Document number
5.	(a) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of State:
	Registered Agent:	AIA Registered Agent Inc
	Registered Office Address:	5647 110 Ayenue North Royal Palm Beach
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :		
	<u>NEW</u> Registered Agent:	DHARIF PHAN
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	72099. Orange Blosson Trail Orlando FL 32809
tha of he lia	the limited liability company is not organized under the at after the change or changes are made, the Florida strefice of the registered agent will be identical. Or, in the creby confirmed that the change(s) was/were authorized ability company or es otherwise provided in the articles mited liability company.	case of a Florida limited liability company, it is by an affirmative vote of the members of the limited
(Si	gnature of a member or authorized representative of a member)	
7P	rinted or typed name of signee)	<u> </u>
r.	" 0 "	Language to got in this compaint. I firstly agree to

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.

Alerships of Registered Agent)

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