L05000085972

· (I	Requestor's Nar	ne)			
	Address)				
	Address)				
,	······				
	City/State/Zip/Ph	none #0			
(1)	Jity/State/Zip/F1				
☐ PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certific	ates of Status			
Special Instructions to Filing Officer:					
	A.	LUNT			
1	- 40				

MAY 1 2 2009

EXAMINER

Office Use Only



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05/08/09--01008--022 **25.00

COVER LETTER

Division of	Corporations					
SUBJECT:	VOGT	PROPERTIE:	S LLC			
		(Name of Lin	nited Lia	bility Company)		
Dear Sir or Madam	ı:					
The enclosed Regi	stered Agent/Reg	gistered Office	Change	and fee(s) are sub	omitted for filing.	
Please return all co	orrespondence co	ncerning this n	natter to	the following:		
JOSIE V	. VOGT			_		
	(Name of Person))				
					ÄLE	2009
					CAL	<u> </u>
	(Firm/Company)		•		HAS	HAY II PHI2
		.			SEF	- <u>[</u>
507 S.	Riverhills	Dr.		_	<u>n</u>	<u> </u>
	(Address)		_		ETARY OF STATE HASSEE, FLORIDA	2009 MAY 1.1 PH 12: 4.8
					JE J	84
Temple '	Terrace, FL	. 33617		_	•	
	(City/State and Zip C	ode)				
For further informa	ation concerning	this matter, ple	ease call	:		
Josie V	. Vogt	at (_		988-6631		
(Na	me of Person)		(Area (Code & Daytime T	Telephone Number)	
Registration Division of Clifton Buil 2661 Execu	Corporations	ESS:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed i	s a check for the	e following am	ount:			
🛭 \$25 Fili	ng 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: VOGT 1	PROPERTIES LLC
2. (a) Principal office address of limited liability company:	507 S. Riverhills Dr.
(Note: MUST BE STREET ADDRESS)	Temple Terrace, FL 33617
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	507 S. Riverhills Dr. Temple Terrace, FL 33617
August 30, 2005	L05000085972
3. Date of filing/registration in Florida 4	. Document number
5. (a) Registered Agent and Registered Office shown on the	ic records of the Frontan Bept. of Stage.
Registered Agent:	JOHN C. VOGT
Registered Office Address:	507 S. Riverhills Dr. 507 S. Temple Terrace, FL 33617
	<u>Om</u> &
(b) Enter name of NEW Registered Agent and/or NEW	Registered Office address:
NEW Registered Agent:	JOSIE V. VOGT
NEW Registered Office Address:	507 S. Riverhills Dr.
(MUST BE FLORIDA STREET ADDRESS)	Temple Terrace ,FL 33617
If the limited liability company is not organized under the lathat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the can hereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	aws of the State of Florida, it is hereby confirmed address of the registered office and the business se of a Florida limited liability company, it is an affirmative vote of the members of the limited organization or the operating agreement of the
JOSIE V. VOGT (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the provision of am familiar with and accept the obligations of my position of 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)	gree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.
(Signature of Registered Agent)	

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