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SECRETARY OF STATE DIVISION OF CORPORATIONS
06 NOV 17 AM 11: 32

J. BRYAN NOV 2 0 2006

COVER LETTER

PO: Registration Section Division of Corporations			
SUBJECT: O'KEEFFE ENTERPRISES (Name of L	USA, LLC .imited Liability Company)		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered C	office Change and fee(s) are submitted for	filing.	
Please return all correspondence concerning	this matter to the following:		
Erik C. Larsen			
(Name of Person)			
(Firm/Company)		6 PN 3	
	•	Sion Sion	
243 W. Park Avenue, Ste. 201		INISION OF CORPORATIONS OF NOV 17 AM 11: 32	
(Address)		7 22	
(1331333)		그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그	
		H SEE	
Winter Park, FL 32789		3 5	
(City/State and Zip Code)		2 3	
For further information concerning this matte	er, please call:		
Erik C. Larsen	at (407) 647-2011		
(Name of Person)	(Area Code & Daytime Tele	ephone Number)	
(Tume of Foldon)	(. 	,	
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314		
Tallahassee, Florida 32301			
Enclosed is a check for the following	g 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.

1. The name of the limit	ted liability company is:	O'KEEFFE	ENTERPRISES USA, LLC	
2. The mailing address of	of the limited liability co	ompany is:		
10401 US HIGHWAY 441	#88, LEESBURG, FL 34	788		
			1.05000400040	-
11/07/2005 3. Date of filing/registration in Florida			L05000108848	
5. Date of ming/registra	don in riorida		4. Document numbe	Γ
5. The name of the regist Florida Department of	tered agent and the regist State:	stered office	address as shown on t	he records of the
	Erik C. Larsen			~~;
		Name		06 SE
243 W. Park Avenue, Ste. 201			3 SE	
Address				N SET
Winter Park, FL 32789 City, State and Zip			- 82E	
6 The name and address	•		•	RP OF S
6. The name and address	of the new registered a	geni and/or	omce:	= 器
	John O'Keeffe			SECRETARY OF STATIONS INVISION OF CORPORATIONS 06 NOV 17 AM 11: 32
	10401 US Highway 4	Name	· · · · · ·	
	Florida street address		NOT acceptable)	
	1 tottau stroot uuutost	3 (1 . G. D 0X	rior acceptable)	
	Leesburg	FL 3478		
	City, S	tate and Zij)	
If the limited liability corconfirmed that after the cand the business office of liability company, it is he of the members of the lin or the operating agreeme (Signature of a member of author)	change or changes are me fithe registered agent with the registered agent with the mited liability company at of the limited liability	ade, the Flo ill be identic change(s) or as other y company.	ws of the State of Flori orida street address of the cal. Or, in the case of a was/were authorized by vise provided in the art	ida, it is hereby he registered office i Florida limited an affirmative vote ticles of organization
7		·· <i>,</i>		
JOHN O'KEEFFE	<u></u>			
(Printed or typed name of signee	,	_		
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm	intment as registered as is of all statutes relative as of all statutes relative ad accept the obligation this document is being for that the limited liability.	gent and ag e to the prop s of my posi iled to mere y company	ree to act in this capac er and complete perfo tion as registered agen ly reflect a change in t has been notified in wr	ity. I further agree to rmance of my duties, it as provided for in the registered office iting of this change.

(Signature of Registered Agent)

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