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(Requestor's Name)		
(Address)		
. (Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Name of Limite Dear Sir or Madam:	CATT PROCESS OF LANGUAGE THE FORE
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	
Name of Person	······
PRESIDENCE ENGLY PROPERTY Firm/Company	<u>n la fulla de milal de la composition della com</u>
Address Address	<u>. 1</u>
City/State and Zip Code	
E-mail address: (to be used for future annual report notification	on)
For further information concerning this matter, plea	ase call:
VISITION GEGOVIA at (at (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 following amo	ount:
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

INHS18 (5/08)

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.

D	The same of the sa
1. Name of the limited liability company: PRESTIC	OF EQUITY BROKER OF MACHENIA
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	STE. 401
(<u></u>	SARASOTA - P. 34237
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	STE. GOLD
	SHRHOTA, TO YEST
3. Date of filing/registration in Florida	LOSOSSICO 340 4. Document number
5. (a) Registered Agent and Registered Office shown on the	
Registered Agent:	- JOHN WAGNER
Registered Office Address:	200 S. ORANGE AVE.
(b) Enter name of NEW Registered Agent and/or NEW	Registered Office address:
NEW Registered Agent:	ELIC CILLIN
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	STE GOT
	SACASOTA FL 34/41
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo	ws of the State of Florida, it is hereby orida street address of the registered office
confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identic liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwise the operating agreement of the limited liability company.	eal. Or, in the case of a Florida limited 📆 was/were authorized by an affirmative voic of
the members of the limited liability company or as otherwise the operating agreement of the limited liability company.	provided in the articles of organization or
the opening agreement of the miner matrix Company.	2 × N
Signature of a member or puthorized representative of a member	<u>-</u> -
	4 many 6.0
Printed or typed name of signee	
I hereby accept the appointment as registered agent and ag	reg to get in this capacity. I findles gove to
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the prop and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mere address, I hereby confirm that the limited liability company	tee and complete performance of my duties, tion as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
Signature of Registered Agont	
Division of Corporations, P.O. Box 632'	7, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (05/08)