L05001/1076

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

MAY 06 2008

EXAMINER

COVER LETTER

	egistration Section vision of Corporations			
SUBJEC	r:	Parker Enterprises LLC (Name of Limited Liability Company)		
Dear Sir o	or Madam:			
The enclo	sed Registered Agent/R	Registered Office Change and fee(s) are submitted for filing.		
Please ret	urn all correspondence	concerning this matter to the following:		
	J. Rich	iard Parker		
	J.R. Parker	Euterprises, LLC		
	1665 Wau (Address)	Path Rd.	70 KAY	
We	St Chester (City/State and Zi	SECRETARY OF STATE TALLAHASSEE, FLORIDA Path Rd Path Rd		
For furthe	er information concerning	ng this matter, please call:	,	
J. R	(Name of Person)	at (6/0) 793 /329 (Area Code & Daytime Telephone No	ımber)	
Re Di Cli 26	CREET/COURIER ADD gistration Section vision of Corporations ifton Building 61 Executive Center Circ Ilahassee, Florida 32301	Registration Section Division of Corporations P.O. Box 6327		
Er	iclosed is a check for t	the following amount:		
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy	\$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 limited liability company is:
2. The mailing address of the limited liability company is: 1665 War Path Rd.
WestChester Pa 19382
noy/6/05 L05000111076
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Ryan P Dugan Pa. Name 11796 - C Metro Parkway
11796 - C Metro Parkway Address Fort Myers FL 33966 City, State and Zip
6. The name and address of the new registered agent and/or office:
Name Side Marker Name Side Ball Harbor Florida street address (P.O. Box NOT acceptable) Punta Gorda FL 37950 City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member of authorized representative of a member)
(Printed or typed name of signee)
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. (Signature of Registered Agent)

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