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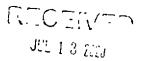
	(Requestor's Name)					
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COVER LETTER

TO: Registration Section Division of Corporations	ì	•	
Barnard Law Offices, L.P. SUBJECT:			
	Name of Limited	Liability Company	_
Dear Sir or Madam:			
The enclosed Registered Agent/Registered (Office Change an	d fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the	e following:	
Andrew C. Barnard			
Name of Person			
Barnard Law Offices, L.P.			2
Firm/Company			7181281 01 C
7801 SW 136 Street			
Address			AMII: 12
Pinecrest, FL 33156			1: 18 EALE
City/State and Zip Cod	e		7,000
andrewbarnard@yahoo.com			
E-mail address: (to be used for future	annual report noti	fication)	
For further information concerning this mat	ter, please call:		
Andrew C. Barnard	305 at (608-4666	_
Name of Person		Area Code & Daytime Telephone Numb	er
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following	ing amount:	ν	
■ \$25 Filing Fee	a :	\$55 Filing Fee & Certified Copy	

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

-Na:	me of the limited liability company: Barnard Law Office				
	7801 SW 136 Street	(b	7801 SW 13		
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<u>-</u>	,, M	ailing address of limited (Note: MAY BE POST	liability company: OFFICE BOX)
	Pinecrest, FL 33156	_	Pincerest, F	L. 33156 	
	12/14/2005		1.050001192		
	Date of filing/registration in Florida	4.		Document number	
<i>(</i>)	Denise M. Barnard				
(a)	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of State	:	
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>. </u>		
	9655 South Dixie Highway. Suite 200			-	7) je l. 7131 20
	Miami , FL	33156		_	声温
					3 SE
(b)	Andrew C. Barnard	Office as	ldrace:	-	를 들었다.
	Enter name of NEW Registered Agent and/or NEW Registered	Office at	iuiess.		OF STATE OF STATE OF STATE AMIL: 12
					AMII: 12
	NEW Registered Office Address:			_	, ,
	7801 SW 136 Street			_	
	Pinecrest	33156			
iang gent as/w e art	limited liability company is not organized under the lave or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	ws of the register ability confirmated in An-	ompany, it inited liability condrew C. Barn	s hereby confirmed they company or as other pany. ard Printed or typed name of the pany.	hat the change(s) erwise provided in

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