L06000000253

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EXAMINER

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: PRIMEINVEST, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DANIEL W. HARTMAN

Name of Person

HARTMAN LAW FIRM, P.A.

Firm/Company

PO BOX 10910

Address

TALLAHASSEE, FL 32302

City/State and Zip Code

DAN@FLLEGALTEAM.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAN HARTMAN

....850

386-4242

Name of Person

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 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. N	ame of the limited liability company: PRIMEINVEST, I	LLC	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
2. (a	Principal office address of limited liability compared (Note: MUST BE STREET ADDRESS)	· • · • · · · · · · · · · · · · · · · ·			
(t	o) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2090 EAST PARK AVENUE TALLAHASSEE, FL 32301			
01/03/	2006	L06000000253			
3. D	ate of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown	on the records of the Flori	da Dept.	of Sta	ite:
	Registered Agent:	STINSON, ACEY			
	Registered Office Address:	2959 APALACHEE PARKWAY			
	1108.200104 9 11100 1 14410000	TALLAHASSEE, FL 32301	٠ خند	<u>~</u>	
				نت	147
			<u> </u>		:
(t	b) Enter name of <u>NEW Registered Agent</u> and/or	NEW Registered Office a	<u>ddress</u> :	8	2
	NEW Registered Agent:	HARTMAN LAW FIRM, P.A.		374 	, .
	NEW Registered Office Address:	207 W. PARK AVE., SUITE A	<u> </u>	Ö	· .
	(MUST BE FLORIDA STREET ADDRESS)	TALLAHASSEE	<u> </u>	.F[323	201
confi and t liabi the n the o	e limited liability company is not organized under irmed that after the change or changes are made, the business office of the registered agent will be it ity company, it is hereby confirmed that the changembers of the limited liability company or as other perating agreement of the limited liability company or a support of a member or authorized representative of a member	ne Florida street address of dentical. Or, in the case of ge(s) was/were authorized berwise provided in the artic	rida, it it the regista Florid by an aff les of or	s hereb stered la limit irmativ ganiza	oy office ted ve vote of tion or
I her compand	L W. HARTMAN Indigital of typed name of signee The signer of typed name of signee The signer of the appointment as registered agent as the signer of the provisions of all statutes relative to the signer of the configurations of motors of the signer of	e proper and complete perf v position as registered ago	ormance ent as pi	e of m y ovided	duties, for in

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