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JAN 26 2009

**EXAMINER** 



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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Windermere Advisors, 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:		
Rosalina Rothwoll		
(Name of Person)		
Windermere Awisous, LLC		
(Firm/Company)		
atiso iwila oakii Ovive		
Server a contract of (Address) of the server of address of address of address of address of address of address		
Windownar, FL 34786		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
fosalina Pothwale at (407) 578-7984		
(Name of Person) (Area Code & Daytime Telephone Number)		
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 amount:		
\$25 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.

in the state of I tortaa.	•
1. Name of the limited liability company: Window	rance Adulsovs, LLC
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	3813 E Colonial DV
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	DAN 23 A
3. Date of filing/registration in Florida	L 06000009784
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
Registered Agent:	Ronald W. Sikes
Registered Office Address:	Winter Garden, FU 7787
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	Rosalina Pothrock
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	9780 wild Oak DV Winderwere ,FL 34786
If the limited liability company is not organized under the lathat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cahereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company.	address of the registered office and the business se of a Florida limited liability company, it is an affirmative vote of the members of the limited
(Signature of a member or authorized representative of a member)	•
Rosalina Rothvode (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proam familiar with and accept the obligations of my position of F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified	gree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.

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

(Signature of Registered Agent)