## L06000018423

(Re	equestor's Name)	
(Ad	ldress)	
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(Ad	ldress)	
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	ty/State/Zip/Phone	<u> </u>
(Cil	y/State/Zip/Pfion	<del>e</del> #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
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Certified Copies	_ Certificates	s of Status
Consist Instructions to	Filing Officer	
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE
AND A HASSEE, FLORIDA

## **COVER LETTER**

Division of Corporations			
SUBJECT: Pan Florida Real Estate Gro (Name of L		bility Company)	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered O	Office Chang	ge and fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter	to the following:	
Clyatt, Randall			
(Name of Person)			
Pan Florida Real Estate Group, LLC.	····	200°	
(Firm/Company)		2001 MAY 21 SECRETAR) ALLAHASSE	
PO Box 23465			
(Address)		STA FLOR	
Ft Lauderdale Florida 33307-3465		—————————————————————————————————————	
(City/State and Zip Code)			
For further information concerning this matter	er, please ca	all:	
Randall Clyatt	_at (_954	) 646-1169	
(Name of Person)		(Area Code & Daytime Telephone Numb	er)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	R D P	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, Florida 32314	
Enclosed is a check for the followin	ng amount:		
<b>✓</b> \$25 Filing Fee		\$55 Filing Fee & Certified Copy	

TO: Registration Section

## 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.

		Pan Florida Real Estate Group, L	LC		
2. The mailing address of	the limited liability c	ompany is : <u>PO Box 23465</u>			
Fort Lauderdale, Fl. 33307-	3465				
02/20/2006		L06000018423			
3. Date of filing/registrat	ion in Florida	4. Document nu	mber		
5. The name of the register Florida Department of		stered office address as shown	on the	record	ls of the
-	Clyatt, Randall				
		Name	_		
	1015 W Newport Ce	nter Drive, Suite 106			
		Address	_ ES	75	
	Deerfield Beach, Fl			2001 HAY	
	City	State and Zip		<b>&gt;</b>	
6. The name and address of	of the new registered a	gent and/or office:	ARY O	21	
	Clyatt, Randall		٠, ٿيـ	U	m
		Name	STA LOR	$\dot{\omega}$	
	1750 NW 3rd Terrace	e, Suite 202	STATE ORID/	Ψ	
	Florida street addres	s (P.O. Box NOT acceptable)			
	Fort Lauderdale	FL 33311			
	City, S	State and Zip			
If the limited liability con	pany is not organized	under the laws of the State of	Florida	a, it is l	hereby

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.

	are an observation of me immediately company.
-	<i>7</i>
	(Signature of a member or authorized representative of a member)
	Randall Clyatt
	(Printed or typed name of signee)
1	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