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TO: Registration Section Division of Corporations

SUBJECT: Cold Assets, 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:

Bruce R. Abernethy, Jr.

(Name of Person)

Bruce R. Abernethy, Jr., P.A. (Firm/Company)

500 Virginia Avenue, Suite 202 (Address)

Fort Pierce, FL 34982

(City/State and Zip Code)

For further information concerning this matter, please call:

Bruce R. Abernethy, Jr. at (772) 489-4901 (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:

I\$25 Filing Fee

55 Filing Fee & Certified Copy

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...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.

Fort Pierce, FL 34950		<u> </u>	<u></u>	·	<u> </u>		
02/28/2006			L06000022256	+ 2			
3. Date of filing/registration in Florida		_	4. Document number				—
5. The name of the register Florida Department of 2		registered of	fice address as shown o	n the record		<u>.</u>	
	Bruce R. Abern				2006		
	Name			52			
	900 Virginia Ave				SEP		
		Address	§	TARY ASSE	61	్రజానాయా 5 క	- · · ·
	Fort Pierce, FL 3			E	7.00	m	
	-(City, State an	id Zip		ANI IC:		
6. The name and address of the new registered agent and/or office:		OF STATE	10: 54	•- <i>-</i> -			
	Bruce R. Aberne	thy, Jr.	•	· · · ·	-		
	500 Virginia Aven	Name nue, Suite 20)2	I			
	Florida street ad	dress (P.O. E	Box NOT acceptable)				
	Fort Pierce,	FL 3	4982				·
	Ci	ty, State and	Zip				

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)

Bruce R. Abernethy, Jr.

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(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.

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(Signature of Registered Agent)

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

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