## L060003337

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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
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(Business Entity Name)		
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(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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Office Use Only



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SECRETARY OF STATE

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Fleare. Note that registered agent has changed and that we have also for Zyara Grand you

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: LIVE WIRE PROPERTIES, LLC (Name of Limited Liability Company)		
(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:		
TAIT / WASHER		
TAIT LUNDOUIST (Name of Person)		
LIVE WIRE PROPERTIES LLC (Firm/Company)		
(Firm/Company)		
250 BEL-FOREST DR		
(ridices)		
BELLEAIR BLUFFS FL 33770		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
TAIT LUNDQUIST at (727) 422-1075		
(Name of Person) (Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section		
Division of Corporations Division of Corporations		
Clifton Building P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
■ \$55 Filing Fee & Certified Copy		

7 7

## 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 company submits the following statement in order to c in the State of Florida.	.508, Florida Statutes, the undersigned limited liability hange its registered office or registered agent, or both,
1. Name of the limited liability company: <u>LIVE</u>	WIRE PROPERTIES LLG
2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	BELLEAIR-BLUTTS, FL 33770
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	250 BEL-FORES DE BOUEAIR BUTTS FL 33770
3-30-06	LO6 0000 33379
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of State:
Registered Agent:	CLIFFORD J HUNT- ESOUIRE
- Registered Office Address:	146 SELOND STREET NORTH SUTE 300
· ·	ST. PETERSBURG FL 33TO)
(b) Enter name of NEW Registered Agent and/or I	NFW Registered Office address:
NEW Registered Agent:	Toit A. Lundants &
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	250 BEI-FORST DR 2
If the limited liability company is not organized under that after the change or changes are made, the Florida's office of the registered agent will be identical. Or, in thereby confirmed that the change was/were authorize liability company or as otherwise provided in the article limited liability company.	he laws of the State of Florida, it is hereby confirmed treet address of the registered office and the business he case of a Florida limited liability company, it is ed by an affirmative vote of the members of the limited es of organization or the operating agreement of the
- B	<u></u>
(Signature of a member or authorized representative of a member)	
Tait A. Lun Davist	
(Printed or typed name of signee)	i de la companya de
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my posit F.S. Or, if this document is being filed to merely reflect confirm that the limited fability company has been not	ia agree to act in this capacity. I further agree to proper and complete performance of my duties, and I ion as registered agent as provided for in Chapter 608, t a change in the registered office address, I hereby fied in writing of this change.

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