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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Home Real ES (Name of L.	Hate Professionals imited Liability Company)	,LLC	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered O	ffice Change and fee(s) are submitt	ted for filing.	
Please return all correspondence concerning t	this matter to the following:		
Alicia Dawn William (Name of Person)	ms		
Home Real Estate Pro	fessionals, LLC	2006 JUN 15 SECRETARY	
37101 N. County Rd.	444	T9 70	
EUSTIS, FL 327	36	2: 20 STATE LORIDA	
For further information concerning this matter Picus Dawn Williams (Name of Person)	er, please call: at (<u>352</u>) <u>735-777</u> (Area Code & Daytin) ne Telephone N	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	g amount:		
\$25 Filing Fee	☐ \$55 Filing Fee & Certifi	ied 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. The name of the limited liability company is: 1 2. The mailing address of the limited liability company is: ス000 3. Date of filing/registration in Florida Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Address 6. The name and address of the new registered agent and/or office: Florida street address (P.O. Box NØ) 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 he operating agreement of the limited liability company. (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.

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