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SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

Division of Corporations		
SUBJECT: Bowers Road, LLC		
(Name of	f 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 concernin	ng this matter to the following:	
Iulia Cupadas		
Julie Swander (Name of Person)		
,		
Bowers Road, LLC	200 SEC	
(Firm/Company)	AHA	
	SSEE	
8101 E Prentice Ave Ste 400		
(Address)	ORA 22	
Greenwood Village, CO 80111	02 TE IDA	
(City/State and Zip Code)		
For further information concerning this ma	itter, please call:	
Julie Swander	at (303) 694-0204	
(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 follow	ing amount:	
\$25 Filing Fee	\$55 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.

1. The name of the limited liability company is: bowers Road, LLC
2. The mailing address of the limited liability company is : 8101 E Prentice Ave Ste 400
Greenwood Village, CO 80111
4/21/06 L06000041233
3. Date of filing/registration in Florida 4. 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:
Nace Cohen
Name
287 Burnt Pine Dr
Address Accionate Address Naples, FL 34119
City, State and Zip
6. The name and address of the new registered agent and/or office:
James H. Forrester
Name RAT NO DET O
1429 Colonial Blvd, Ste 201
Florida street address (P.O. Box NOT acceptable)
Fort Myers FL 33907
City, State and Zip
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.
(Signature of a member or authorized representative of a member)
Gary R. Gorman (Printed of typed name of signer)
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 final ed liability company has been notified in writing of this change.

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

INHS18 (8/05)