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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Richley, LLC (Name of	Limited Liabili	ty Company)	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered	Office Change	and fee(s) are submitted	for filing.
Please return all correspondence concernin	g this matter to	the following:	
Shirley I Porosky (Name of Person)		-	07 APR -4 SECRETAL
(Firm/Company) 17842 SE 120th Court		-	APR -4 AM ID: 31 SECRETARY OF STATE TALLAHASSEE. FLORIDI
(Address)	· · · · · · · · · · · · · · · · · · ·	-	19
Summerfield, FL 34491 (City/State and Zip Code)		_ ·	
For further information concerning this ma	tter, please call:		
Shirley Porosky	at (352	₎ 347-3502	
(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	Reg Divi P.O.	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, 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: Richley, LLC 2. The mailing address of the limited liability company is : 17842 SE 120th Court Summerfield, FL 34491 L06000052676 5/22/06 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: Corporation Service Company Name 1201 Hayes Street Address Tallahassee, FL 32301 City, State and Zip 6. The name and address of the new registered agent and/or office: Shirley I Porosky Name 17842 SE 120th Court Florida street address (P.O. Box NOT acceptable) Summerfield FL 34491 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)

Richard W. Porosky

(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 auties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 508, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, whereby 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