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M. THOMAS SEP - 8 2008 EXAMINER

### **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Stay Safe LLC (Name	e of Limited Liability Company)	-	0
Dear Sir or Madam;			
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning	g this matter to the following:		
Ralph Torres			
(Name of Person)		ASS	BC
Chair Cafa LLO		EX.	SEP
Stay Safe LLC (Firm/Company)	<del></del>	ASSE ANDA	2
		E 고	PH 12: 05
1707 1ST Street East		255	Ÿ
(Address)		중교	S.
Bradenton Florida 34208			
(City/State and Zip Code)			
For further information concerning this mat	tter, please call:		
Ralph Torres	at ( 941 ) 276-9662		
(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 followi	ng amount:		
2 \$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. Name of the limited liability company: Stay Safe LLC		
2. (a) Principal office address of limited liability compared (Note: MUST BE STREET ADDRESS)	ny: 1130 Manasota beach road Englewood Florida 34223	0 6
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1130 Manasota Beach road Englwood Florida 34223	8
07-07-2008  3. Date of filing/registration in Florida	LO-6000056156 4. Document number	
5. (a) Registered Agent and Registered Office shown or		
Registered Agent:	Ralph Torres	
Registered Office Address:	1130 Manasota Beach Road Englewood Florida 34223	ı
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u>	EW Registered Office address:	93 SEP
NEW Registered Agent:	Dalah Tamas	יו ת
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1707 1ST Street East 77 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	P
If the limited liability company is not organized under the that after the change or changes are made, the Florida stre office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.  (Signature of a member or authorized representative of a member)	e laws of the State of Florida, it is hereby confirmed eet address of the registered office and the business case of a Florida limited liability company, it is	d S
Ralph Torres (Printed or typed name of signee)		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pam familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified.  (Signatury of Registered Agent)	agree to act in this capacity. I further agree to roper and complete performance of my duties, and n as registered agent as provided for in Chapter 60 i change in the registered office address, I hereby ed in writing of this change.	l I 08,

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