## LD000112749

Erik C Larsen P.A (Requestor's Name)
243 W. Park Ave
Stc 201 (Address)
Winter Park FL 32789 (City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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2007 NOV 19 PH 1: 38
SECRETARY OF STATE
VALLAHASSEE, FLORIDA

## 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: FEAKINS ENTERPRISES, LLC	
2. The mailing address of the limite	ed liability company is :	
2463 Blackburn Circle, Cape Coral, F	L 33991	
11/22/2006	L06000112749	
3. Date of filing/registration in Flor		
5. Date of ming/registration in Flor	4. Document number	
5. The name of the registered agent Florida Department of State:	and the registered office address as shown on the records of the	
Erik C. I	Larsen	
	Name	
243 W. F	Park Avenue, Ste. 201	
	Address	
Winter P	ark, FL 32789	
	City, State and Zip	
6. The name and address of the new	registered agent and/or office:	
Steve J.	Feakins	
5.400 51	Name	
	ckburn Circle	
Florida s	street address (P.O. Box NOT acceptable)	
Cape Co		
	City, State and Zip	
confirmed that after the change or cl and the business office of the registe		
STEVE J. FEAKINS		
(Printed or typed name of signee)		
	registered agent and agree to act in this capacity. I further agree to tutes relative to the proper and complete performance of my duties, he obligations of my position as registered agent as provided for in ent is being filed to merely reflect a change in the registered office mited liability company has been notified in writing of this change.	
(Signature of Registered Agent) STEVE	J. FEAKINS	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 323141 FILING FEE: \$25.00		
INHS18 (8/05)		