LO60000 113498

(Re	equestor's Name)	
(Address)		
(Address)		
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
	·	

Office Use Only



500133969115

08/07/08--01030--001 **25.00

2008 AUG - 7 AM IO: 51
SECRETARY OF STATE
AND AHASSEE, FLORID

.

T. CLINE

AUG - 8 2008

EXAMINER

COVER LETTER		
TO: Registration Section Division of Corporations		
SUBJECT: Chad Select (N	lame of Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Register	ered Office Change and fee(s) are submitted for filing.	
Please return all correspondence conce	rning this matter to the following:	
Brad Chadwick (Name of Person)		
Chad Sclect Property M (Firm/Company)	lanagement, CCC PER E	
109 N 01d Dixie	1 Anny enert, LCC SECRETARY OF STATE TALLAHASSEE.FLORIT 2159	
Lady Luke, FL 32159 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this	s matter, please call:	
Brad Chadwick (Name of Person)	at (352) 2/7-/227 (Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

□ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

Enclosed is a check for the following amount:

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:	Select Property Management, LCC
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	any: 109 N. Old Digie Huy Lady Lake, Fl 32159
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	109 N. Old Dixie Huy Lady Lake, Fe 32159
11-27-06	L06000113498
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:
Registered Agent:	Corporation Service Company
Registered Office Address:	1201 Hays Street Tallahassee, FL 32301
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	
NEW Registered Agent:	Bradley K. Challack 1
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	109 D. Old Dixie Hay
If the limited liability company is not organized under that after the change or changes are made, the Florida st 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 article limited liability company.	treet address of the registered office and the business be case of a Florida limited liability company, it is
(Signature of a member or authorized representative of a member)	
BRAD CHADWICK	
(Printed or typed name of signee) I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my positive. S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been notifications of Registered Agent)	nd agree to act in this capacity. I further agree to proper and complete performance of my duties, and I ion as registered agent as provided for in Chapter 608, t a change in the registered office address, I hereby fied in writing of this change.

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