LOCOO 113498

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(City, Classify, Total II)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
	_
Special Instructions to Filing Officer:	
L. SELLERS	

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MAR 2 9 2010

EXAMINER



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03/17/10--01027--009 **25.00

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SECRETARY OF STATE
AND ANASSEE, FLORIDA

COVER LETTER

Division of Corporations	
	POPERTY MANAGEMENT, LLC d Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	natter to the following:
BRAULEY K. CHADE	
CHAD SELECT PROPERTY.	MGT, LLC
P.O. Box 1147	
LADY LANE, FL City/State and Zip Code	72158
E-mail address: (to be used for future annual report notificati	on)
For further information concerning this matter, ple	ase call:
BRAD (HADWICK at (352) 217-1227
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations P.O. Box 6327
Clifton Building 2661 Executive Center Circle	
Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following am	ount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 18, 2010

BRADLEY L. CHADWICK P.O. BOX 1147 LADY LAKE, FL 32158

SUBJECT: CHADSELECT PROPERTY MANAGEMENT LLC

Ref. Number: L06000113498

We have received your document for CHADSELECT PROPERTY MANAGEMENT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the highlighted portion of the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 910A00006773

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR L \downarrow MITED LIABILITY COMPANY -

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited

agent, or both, in the State of Florida.	to change its registered office or registered
1. Name of the limited liability company:	ELECT PROPERTY MANAGEMENT, LL
2. (a) Principal office address of limited liability company:	5322 EDLEWATER WAY
(Note: MUST BE STREET ADDRESS)	OXF0RD, FL 34484
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	
11-27-2006	L06000113498
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:
Registered Agent:	BRADLEY R. CHAPWICK
Registered Office Address:	17390 SE 82NO ROSLYN CT. LADY LAKE FL 32162
(b) Enter name of <u>NEW Registered Agent</u> and/of <u>NEW NEW Registered Agent</u> :	V Registered Office address:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5322 EDGE WATER WY. BYFURD FL 34484
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of Florida limited was/were authorized by an affirmative vote vise provided in the articles of Florida limited was/were authorized by an affirmative vote vise provided in the articles of Florida limited was/were authorized by an affirmative vote vise provided in the articles of Florida limited was/were authorized by an affirmative vote vise provided in the articles of Florida limited was/were authorized by an affirmative vote vise provided in the articles of Florida limited was/were authorized by an affirmative vote vise provided in the articles of Florida limited was/were authorized by an affirmative vote vise provided in the articles of Florida limited was/were authorized by an affirmative vote vise provided in the articles of Florida limited was/were authorized by an affirmative vote vise provided in the articles of Florida limited was/were authorized by an affirmative vote vise provided in the articles of Florida limited was/were authorized by an affirmative vote vise provided in the articles of Florida limited was/were authorized by an affirmative vote vise provided in the articles of Florida limited was/were authorized by an affirmative vote vise provided in the articles of Florida limited was/were authorized by an affirmative vote vise provided in the articles of Florida limited was at the second limited was at

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