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2001 MAR -9 P 1: 49
SECRETARY OF STATE.

FILED

COVER LETTER

	tion Section of Corporation	s				
SUBJECT:	JLO	PROPER (Name of Lin	2TIES, LL	- C mpany)		
Dear Sir or Mad The enclosed Re		/Registered Off	ce Change and fe	ee(s) are submit	ted for filing.	
Please return all	correspondenc	e concerning thi	s matter to the fo	llowing:	٠	
DAL	(Name of Po	DRIENTE erson)			. 20 Tal	
<u>JLo</u>	f no fer (Firm/Comp	-77€3 <u>, L</u> L pany)	<u>. C</u>		2007 MAR -9 P 1: 49 SECRETARY OF STATE ALLAHASSEE, FLORIDA	
4622	(Address)	LE JOH	~ TRAIL		P 1: 49 F STATE FLORIDA	ED
SART	(City/State and 2	FL 34 Zip Code)	232			
For further infor	mation concern	ing this matter,	please call:			
DAND	Same of Person	Eルアモ a	t (<u>941</u>)(Area (921-366 Code & Daytim	ne Telephone Ni	umber)
Registrati Division o Clifton Bo 2661 Exec	COURIER AD on Section of Corporations uilding cutive Center Cir ee, Florida 3230	rcle	Registratio Division of P.O. Box 6	f Corporations		
Enclosed	l is a check for	the following a	amount:			
X \$25 Fi	iling Fee		☐ \$55 Filin	ig Fee & Certifi	ied 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: <u> </u>
2. The mailing address of the limited liability company is: 4622 LITTLE JOHN THAIL.
SARASOTA, FL 34232
12/19/06 LOGODO / 20463 3. Date of filing/registration in Florida 4. Document number
12/19/06 LOGOBO/20463 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:
Florida Department of State: PREWETT, DANIEL L. DSE STATE STA
5777 BENEVA ROAD AR E T
Address
Name 5777 BENEVA ROAD Address SARASOTA, FL 34231 City, State and Zip 6. The name and address of the new registered agent and/or office: 100 100 100 100 100 100 100 1
6. The name and address of the new registered agent and/or office:
6. The name and address of the new registered agent and/or office: NAZALIE M. SWANEY, CP,
7131 Curtiss Que Unita
Florida street address (P.O. Box NOT acceptable)
Soreste FL 34231
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)
PAVID J. ORIENTE (Printed or typed name of signec)
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 duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608 (F.S. Or, if this document is being filed to merely reflect a change in the registered office address, Thereby confirm that the limited liability company has been notified in writing of this change.

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