LOG 0000/22594

•		
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: DELF (Firm/Company) For further information concerning this matter, please call: (Name of Person) at (306) 392-7929

(Area Code & Daytime Telepho (Area Code & Daytime Telephone Number) STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: \$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: Frontie	Property Monggement L.C.
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	Miami, FL. 33166
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Miami, FL. 33166
12/27/2006	L0600012259b
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on the	the records of the Florida Dept. of State:
Registered Agent:	Corporate Creations Network, In
Registered Office Address:	11380 Prosperity Forms Rd. #221E Palm Beach Cordens FL. 33410
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent:</u> NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	TUPY NW OUTH To treet
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the change confirmed that the change(s) was/were authorized bliability company or as otherwise provided in the articles of limited highly company. (Signature of anemaly or authorized representative of a member) (Printed or typed name of signee) I hereby/accept the appointment as registered agent and a comply with the provision log all statutes relative to the proam landiar with and accept the obligations of my position F.S. Or, if this documents being filed to merely reflect a confirm that the limited hability company has been notified	aws of the State of Florida, it is hereby confirmed t address of the registered office and the business ase of a Florida limited liability company, it is by an affirmative vote of the members of the limited f organization or the operating agreement of the
(Signature of Registered Agent)	6327 Tallahassaa FL 32314

FILING FEE: \$25.00