

L07000003310

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(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 13, 2009

MATTHEWS FENDERSON
1307 EAST ROBINSON STREET
ORLANDO, FL 32801

SUBJECT: BLB INC. LLC
Ref. Number: L07000003310

We have received your document for BLB INC. LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 509A00032809

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BLB INC. LLC
Name of Corporation

DOCUMENT NUMBER: L07000003310

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matthews Fenderson
Name of Contact Person

Law Offices of Matthews Fenderson
Firm/Company

1307 East Robinson Street
Address

Orlando, Florida 32801
City/State and Zip Code

mfenderson@lawofficesofmatthewsfenderson.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthews Fenderson at (407) 894-6441
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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: BLB Inc. LLC

2. (a) Principal office address of limited liability company: 1109 French Ave.

☐ (Note: **MUST BE STREET ADDRESS**)

Sanford, Florida 32771

(b) Mailing address of limited liability company:

☐ (Note: **MAY BE POST OFFICE BOX**)

633 Little Wekiva Street

Altamonte Springs, Florida 32714

01/10/2007

L07000003310

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Betty L. Brown

Registered Office Address:

633 Little Wekiva Street

Altamonte Springs, Florida 32714

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

Matthews Fenderson

NEW Registered Office Address:

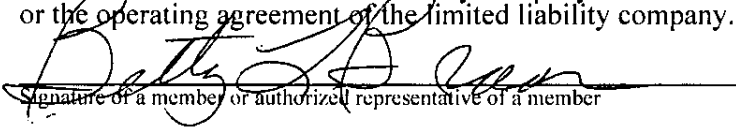
(MUST BE FLORIDA STREET ADDRESS)

Law Offices of Matthews Fenderson

1307 E. Robinson Street

Orlando, FL 32801

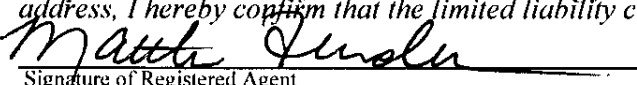
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida 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

Betty L. Brown

Printed or typed name of signee

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, I hereby confirm that the limited liability company has been notified in writing of this change.


Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00