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(Requestor's Name)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
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Special Instructions to Filing Officer:		
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EXAMINER

Office Use Only

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COVER LETTER

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TO: Registration Section Division of Corporations	
SUBJECT: NEW BROAD STREET INV (Name of L	VESTMENTS, LLC .imited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
COLLEEN BOLENA (Name of Person)	
NEW BROAD STREET COMPANIES (Firm/Company)	
420 S ORANGE AVE STE 400 (Address)	
ORLANDO FL 32801 (City/State and Zip Code)	
For further information concerning this matter, p	please call:
	(Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following a	mount:
☑ \$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: <u>NEW BROA</u>	AD STREET INVESTMENTS, LLC
2. (a) Principal office address of limited liability compan (<u>Note: MUST BE STREET ADDRESS</u>)	y: 420 S ORANGE AVE STE 400 ORLANDO FL 32801
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	420 S ORANGE AVE STE 400 ORLANDO FL 32801
01/16/2007 2. Deta of Slice (registration in Election	L07000005040
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:	DAVID G. PACE
Registered Office Address:	4776 NEW BROAD STREET, SUITE 110 ORLANDO, FL 32814
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	420 S ORANGE AVE STE 400 ORLANDO ■,FL 32801
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 chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	laws of the State of Florida, it is hereby confirmed
DAVID G. PACE, MEMBER/MANAGER/PRESIDENT (Printed or typed name of signee)	- SSE - T
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pram familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notifie (Signature of Registered Agent)	agree to act in this capacity. I further agree to reper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby a in writing of this change.

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