L070000007286

(Re	equestor's Name)			
(Ad	ddress)			
(Ac	ddress)			
· (C	ity/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of St	atus		
Special Instructions to Filing Officer:				
!				

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SECRETARY OF STATE

D. BRUCE

MAR 3 0 2009

EXAMINER

COVER LETTER

TO: Registration Section

INHS18 (5/08)

Division of Corporations		
SUBJECT: FORTE, LLC		3
(Name of Lim	mited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this n	matter to the following:	
·	matter to the following.	
Robert J. LeBlanc, Jr.		
(Name of Person)		
. FORTE III O		
FORTE, LLC (Firm/Company)	———	
	DECE LLA	_
1701 Meeting Place #208	09 MAR 27 SECRETARN LLAHASSE	Existing Control
(Address)	117-	FALL CONTRACTOR
Orlando, FL 32814-6615 (City/State and Zip Code)	STATE CORRE	
(, ,	DA DA	
For further information concerning this matter, ple	lease call:	
.		
Robert J. LeBlanc, Jr. at ((407) 461-4794	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section 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 am	nount:	
☑ \$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. Na	me of the limited liability company: FORTE, L	LC	
2. (a)	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	any: 1701 Meeting Place #208 Orlando, FL 32814-6615	
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1701 Meeting Place #208 Orlando, FL 32814-6615	
01/19/	2007	L07000007286	
3. Date of filing/registration in Florida		4. Document number	
5. · (a)	Registered Agent and Registered Office shown o		•
	Registered Agent:	Corporation Service Compa	ny
	Registered Office Address:	1201 Hays Street	
:		Tallahassee, FL 32301	
•			
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	EW Registered Office addr	SSEE SSEE
	NIEW Designation of OCC - Address	4704 Marking Diago 4000	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRES)		1701 Meeting Place #208	
	MOST BUT LORIDA STRULT ADDRESS	Orlando	■ 55 32814-6615
that af office hereby liabili limite	limited liability company is not organized under the fier the change or changes are made, the Florida strof the registered agent will be identical. Or, in the confirmed that the change(s) was/were authorized ty company or as otherwise provided in the articles d liability company.	eet address of the registered of a Florida limited liable to a firmative vote of the	office and the business bility company, it is members of the limited
	t J. LeBlanc, Jr. I or typed name of signee)		
=	eby accept the appointment as registered agent and y with the provisions of all statutes relative to the publicar with and accept the obligations of my position, if this document is being filed to merely reflect to make the limited liability company has been notificated.	l agree to act in this capacity. proper and complete perform	I further agree to

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