2001/003

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Division of Corporations
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To:

Division of Corporations

rax Number

: (850)205-0380

From:

Account Name :

: AARON A. FARMER, P.L.

Account Number : 120070000090

: (239)262-2040

Phone Fax Number

: (239)262-2180

REGISTERED AGENT CHANGE

PBS RENTALS OF MARYLAND, LLC

Certificate of Status	0
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INHS 18 (8/05)

INTERNATIONAL IMMIGRATIO

2002/003

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: PBS RENTALS OF MARYLAND	D, LLC	
(Name of Limited Liability Company)		
Dear Sir or Madam;		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this t	natter to the following:	
Maria C. Ferrao (Namo of Person)	· · ·	
Agron A. Farmer, P.L.	- 	
720 Fifth Avenue South, Suite 211	 -	
Naptes, FL 34102 (City/State and Zip Code)	<u> </u>	
For further information concerning this matter, please call:		
	239 262-2040	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahastee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following an	iount:	
☑\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

. ..07/09/2007 19:33 FAX 2392618477

850-245-6897

INTERNATIONAL_IMMIGRATIO

2003/003

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: PBS RENTALS OF MARYLAND, LLC
2. The mailing address of the limited liability company is : 623 NE 5th Terrace.
Fort Lauderdale, FL 33304
2/2/07 L07000012886
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:
Fowler White Boggs Banker PA
5811 PELICAN BAY BLVD., SUITE 600
Address
Naples, Ft. 34108
City, State and Zip
6. The name and address of the new registered agent and/or office:
Aaron A. Farmer, P.L.
Name 720 Fifth Avenue South, Suite 211
Plorida street address (P.O. Box NOT acceptable)
Naples, FL 34102 FL
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. **The Company of a member or otherwise representative of a member)** **The Company of the State of Florida, it is hereby confirmed liability company or as otherwise provided in the articles of organization or the Operating agreement of the limited liability company.
Agron A. Farmer
(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 obliquitims of my position as registered agent as provided for in Chapter 508, F.S. Or, if this accument is being filed to merely reflect a change in the registered office address, I hereby for that the limited liability company has been notified in writing of this change.
(Signiture of Regulered Agent)
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: S25.00

INFIS18 (8/05)