## L07000018796

(Requestor's Name)				
•				
(Address)				
(44)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(business Enuty Name)				
(Document Number)				
Certified Copies Certificates of Status				
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Special Instructions to Filing Officer:				
· ·				

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2012 JAN -3 PH 3: 47

J. BRYAN

JAN -5 2012

EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corporations			
	Division of Corporations			
SUBJ	ECT: Emerald Coast Manager	ment Service, LL	_C	_
	(Name o	f Limited Liability Co	ompany)	
The enfiling.	nclosed member, managing memb	er or manager resi	ignation and fee(s) are submitted	d for
Please	e return all correspondence concern	ning this matter to	o:	
Peter	Boros .			
	(Contact Person)		SETAL	<u>}</u>
			CRET	<b>=</b> 7
	(Firm/Company)		ARY	TILLS PR
5281	Baywater Drive		OF STATE	TILL5
	(Address)		TATE ORID	-
Tamp	a, Florida 33615		7	
····	(City/State and Zip Code)	<del></del>	<del></del>	
For fu	orther information concerning this	matter, please call	:	
Peter	Boros	at (	748-9268	
	(Name of Contact Person)	<del></del>	e & Daytime Telephone Number)	,
Enclos	sed please find a check made paya \$25 Filing Fee			
Regist Division Clifton 2661 I	cet/Courier Address: tration Section on of Corporations n Building Executive Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

CR2E079 (5/06)

## 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:Emeralc	d Coast Management Service	e, LLC		
2. (a) Principal office address of limited liability compar	ny: 155 South Court A	venue		
(Note: MUST BE STREET ADDRESS)	2606 Orlando, florida 32801 US			
(b) Mailing address of limited liability company:	155 South Court Avenue	e		
(Note: MAY BE POST OFFICE BOX)	2606 Orlando, florida 32801 US			
02/19/2007	L07000018796			
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				
Registered Agent:	Andrey Shavkun			
Registered Office Address:	155 South Court Avenue, 2606 Orlando, Florida 32801 US	T T		
(b) Enter name of <b>NEW Registered Agent</b> and/or <b>NE</b>	EW Registered Office address	12 K		
NEW Registered Agent:	Peter Boros	ب		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5281 Baywater Drive	S. S.		
	Tampa,FL	33615		
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be identiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	Florida street address of the registerentical. Or, in the case of a Florida lines, was/were authorized by an affirm	ed office nited ative vote		
Peter Boros				
Printed or typed name of signee	_			
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the property and I am familiar with and accept the obligations of my property 608, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability companies of Registered Agent	agree to act in this capacity. I furth roper and complete performance of i osition as registered agent as provid erely reflect a change in the register ny has been notified in writing of this	er agree to my duties, led for in ed office s chänge.		

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