L070000 28588

(Re	equestor's Name)					
(Ad	dress)					
(Ad	ldress)					
(Cit	ty/State/Zip/Phon	e #)				
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SEURETARY OF STATE TALLAHASSEE, FLORIDA

TED THE

COVER LETTER

TO:	Registration Section Division of Corporations				
	•				
SUBJE					
	Name	of Li	mited Li	ability Company	
Dear Si	r or Madam:				
The end	closed Registered Agent/Registered Office	e Cha	nge and	fee(s) are submitted for filing.	
Please 1	return all correspondence concerning this	matte	r to the	following:	
	Alan W. Tompkins				
	Name of Person				
	Unity Hunt, Inc.				
	Firm/Company				
	1601 Elm Street, Suite 400	0			
	Address			_	
	Dallas, Texas 75201				
-	City/State and Zip Code				
	vickiw@unityhunt.com				
E	-mail address: (to be used for future annu-	al rep	ort notif	ication)	
For fur	ther information concerning this matter, p	lease	call:		
	Alan W. Tompkins	at (214	720-1600	
	Name of Person	(_		Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS:		М.	AILING ADDRESS:	
	Registration Section	Registration Section			
	Division of Corporations	Division of Corporations			
	Clifton Building	P.O. Box 6327			
	2661 Executive Center Circle Tallahassee, Florida 32301		Ta	llahassee, Florida 32314	
Enclosed is a check for the following amount:					
	☎ \$25 Filing Fee		□ \$5	55 Filing Fee & Certified Copy	
INHS18	3 (2/14)				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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:MUSTANG AD	VISERS, LL	С		
2	(a)	OLD: 25 W Government St, Pensacola FL 32502	(b)	OLD: 25 W	V Government St, Pens	sacola FL 32502
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (5)		failing address of limite	ed liability company:
		NEW: 719 S. Palafox Street		NEW: 719 S	S. Palafox Street	
		Pensacola, FL 32502	 ,	Pensa	acola, FL 32502	
_		March 16, 2007	- , -		.07000028588	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)					
		Registered Agent and Registered Office shown on the records of	the Florida I	Dept. of State:	:	
		25 W Government St, Pensacola, FL 32502				
		Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)			
						
		, FL	·			£ 5
						15 MAR SEGRET
	(b)					HM R AS N
		Enter name of NEW Registered Agent and/or NEW Registered	Office add	<u>'ess</u> :		EILI 24 PARN ASSI
						RY O
		NEW Registered Office Address:				12: 24 STATE FLORID
		719 S. Palafox Street				DE 4
		Pensacola , FL	32502			
		, i cisacola, i c	02002			
the ag wa	e cha ent v as/w	imited liability company is not organized under the lavinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the regist ability cor of the limi	ered office npany, it is ed liability	and the business o hereby confirmed company or as oth	ffice of the registered that the change(s)
	o:	The state of the s			okins, Authorized Repre	
	_	ture of a methoer or authorized representative of a member			Printed or typed name	0
pr the	ovisi e obi mer	by accept the appointment of registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I id in writing of this change.	ree to act i performa d for in Ci hereby coi	n this capa nce of my d napter 605, nfirm that t	wity, I further agre luties, and I am fan F.S. Or, if this do he limited liability	e to comply with the niliar with and accept cument is being filed company has been
Si	gnatu	are of Registered Agent				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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1.	Na	me of the limited liability company:	MUSTANG ADV	/ISERS, LL	0		
2	(a)	OLD: 25 W Government St, Pensacola FL 325	502	(h)	OLD: 25 \	W Government St, Pensac	cola FL 32502
	(u)	Principal office address of limited liability (<i>Note: MUST BE STREET ADDR</i>		_ (0),		Mailing address of limited (Note: MAY BE POST	liability company:
		NEW: 719 S. Palafox Street			NEW: 719	S. Palafox Street	
		Pensacola, FL 32502			Pens	sacola, FL 32502	
		March 16, 2007		· <u> </u>		L07000028588	
3.		Date of filing/registration in Flo	orida	4.		Document number	
5.	(a)	William A. Bond					
		Registered Agent and Registered Office shown or	the records of the	ne Florida D	ept. of State	:	
		25 W Government St, Pensacola, FL 32502					
		Registered Office Address (MUST BE FLOR	IDA STREET A	DDRESS)		•	:
							图 图 5
						•	FILED 15 MAR 24 PH 12: 23 SEURETARY OF STATI ALLAHASSEE, FLORII
			, FL_				HAR 24 AHASSI
							24 PI Z4 PI JARY (JASSEE
	(b)	Enter name of NEW Registered Agent and/or N	FW Dogistored (Office addr	nte,	•	EGF PRICE
		Enter name of NEW Registered Agent and/or N	EW Registered	Office addr	ess.		FLC ST P:
							12: 23 STATE FLORID
		NEW Registered Office Address:					P
		719 S. Palafox Street					
		Pensacola	FI.	32502			
			-			•	
th ag wa	e cha ent v as/we	imited liability company is not organized inge or changes are made, the Florida strewill be identical. Or, in the case of a Florer authorized by an affirmative vote of the cles of organization or the operating agreement.	et address of i ida limited lia ne members of	the registe bility con f the limit	ered office npany, it is ed liability	e and the business off s hereby confirmed the y company or as other	ice of the registered at the change(s)
_	.	ture of a member or authorized representative of a			Man W. Tom	pkins, Authorized Represe	
					• .	Printed or typed name of	
pr th to	ovisi e obl mer	by accept the appointment as registered a ions of all statutes relative to the proper of ligations of my position as registered age ely reflect a change in the registered offic d in writing of this change.	agent and agre and complete p nt as provided se address, I h	ee to act i performan I for in Cl pereby con	n this cape ice of my e apter 605 ifirm that i	acity. I further agree duties, and I am fami i, F.S. Or, if this doct the limited liability co	to comply with the liar with and accept ument is being filed ompany has been
-	anotu	are of Registered Agent					