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## **COVER LETTER**

ation Section n of Corporations					
Otah, LLC (Name of Limited Liability Company)					
(ivalue of Limited Liability Company)					
dam:					
Registered Agent/Registered Office Change and fee(s) are	hmitted for filing				
segment Agend Registered Office Change and rec(s) are	offitted for fiffing.				
ll correspondence concerning this matter to the following					
(Name of Person)					
change Experts, LLC					
(Firm/Company)					
•					
tice Ave., Ste. 400	72 200 22 200 200 200 200 200 200 200 20				
(Address)	2007 SEP 1.0 SEGRETARY ALLAHASS				
lage, CO 80111					
(City/State and Zip Code)	AHII: 28 OF STATE				
rmation concerning this matter, please call:	Dm 18				
at (303) 694-0204					
(Name of Person) (Area Code &	ytime Telephone Number)				
	MAILING ADDRESS:				
	Registration Section				
	Division of Corporations P.O. Box 6327				
	Tallahassee, Florida 32314				
•					
d is a check for the following amount:					
see, Florida 32301	2314				

## 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.

agen, or som, mine sic	to of 1 to read.				
1. The name of the limit	ed liability company is:	Kotah, LLC			•
2. The mailing address of	of the limited liability co	mpany is : 810	11 E. Prentice Ave., Sto	e. 400,	<u></u> ,
Greenwood Village, CO 8	0111				
					*
May 9, 2007		<u>L(</u>	07000049536		
3. Date of filing/registra	tion in Florida	4.	Document number		
5. The name of the regist Florida Department of	tered agent and the regis	tered office add	dress as shown on the	e records of the	
	James H Forrester				
		Name			
	1429 Colonial Blvd., S	Ste. 201			
		Address			
	Ft. Myers, FL 33908				
	City,	State and Zip			
6. The name and address	of the new registered ag	ent and/or offi	ce:		
	Michael Tannenbaun	n, Esq.		-1 12	
		lame		13/E1	
	2161 Palm Beach Lak	es Blvd., Ste.	304	E SE	11
	Florida street address	(P.O. Box NO	T acceptable)	SEP 10 AH II	
1	West Palm Beach	FL 33409	_	2 Y O P	
	City, St	ate and Zip		TES E	14. com
If the limited liability cor confirmed that after the cand the business office of liability company, it is he of the members of the lift or the operating agreeme	change or changes are manifered to the registered agent will be reby confirmed that the mited liability company of the company	ade, the Florida Il be identical. change(s) was or as otherwise	a street address of the Or, in the case of a F /were authorized by a	a, it is herebys e registered offi- florida limited an affirmative v	ote
Jam. L	cel				
(Signature of a member or author	rized representative of a member	·)			
Phillip M. Ladd, Assistant	Manager				
(Printed or typed name of signee	·				
I hereby accept the appo comply with the provision and I am familiar with an Chapten 608, F.S. Or, if address I hereby fonfirm	intment as registered ag is of all statules relative id accept the obligations this document is being fi i that the limited liability	ent and agree to to the proper c of my position led to merely r company has	to act in this capacity ind complete perform as registered agent effect a change in the been notified in writi	y. I further agre nance of my dut as provided for e registered offi ing of this chan	e to ies, in ce ge.
(Signature of Registered Agent)					

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