050626 $\gamma 7 n$ ŝ,

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
A. LUNT				
APR - 5 2010				
EXAMINER				

Office Use Only



04/01/10--01020--009 **25.00

· • .

2010 APR - 1 AM 11: 55

FILED

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: NOV 8235 Q UC Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing.			
Please return all correspondence concorning	this matter to the following:			
Hubert G. Phipps Name of Person		2010		
Firm/Company		APR -		
455 Australian Avenue, Address	Apt. 2B	2010 APR - 1 AM 11: 55		
Palm Beach, FL 33480 City/State and Zip Cod.	این جز	Ğ,		
hapmarco @ aol. com Benkil address: (to be used for future annual report no	otification)			
For further information concerning this matte	er, please call:			
Hubert Phipps Name of Person	at (<u>305</u>) <u>918-9660</u> Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				
\$25 Filing Fee	\$55 Filing Fee & Certified Copy			

FILED

~

ه سب

١

. .

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.

ļ

	1. Name of the limited liability company:	VE235GLLC			
	2. (a) Principal office address of limited liability company	10982 Denoeu Rd			
	-[] (<u>Note: MUST BE STREET ADDRESS</u>)	Boynton Brach FI 33472			
	(b) Mailing address of limited liability company:				
	(Note: MAY BE POST OFFICE BOX)	PO 740020 BOYNER BEACH FL 33472			
	5/11/07	L 0700050626			
	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 State:				
	Registered Agent:	Alan Holdman Esq			
	Registered Office Address:	1610 Southern BIE			
		WPB FL			
	ろう406 (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :				
	X <u>NEW</u> Registered Agent:	Hubert G. Phipps			
	<u>NEW</u> Registered Office Address:	455 Australian Ave, Apt 2B			
	X (MUST BE FLORIDA STRUET ADDRESS)	Palm Beach ,FL 33480			
4_	If the limited liability company is not organized under the l confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identi- liability company, it is hereby confirmed that the change(s) 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 representations of a member Hober Phipps	orida street address of the registered office ical. Or, in the case of a Florida timited was/were authorized by an affirmative agte wise provided in the articles of organization			
×	I hereby accept the appointment as registered agent and an comply with the provisions of all statutes relative to the pro- and I am familiar with and accept the obligations of my pos- Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the linited liability company Signature of Registered Agent	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.			
	Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00				

.