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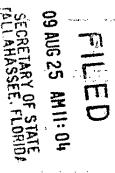
. (Requestor's Name)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number) '		
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Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
Special instructions to 1 ming Officer.		
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J. BRYAN

AUG 26 2009

EXAMINER

COVER LETTER

Division of Corporations		
SUBJECT:	Boruma LLC	
	of Limited Liability Com	ıpany
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	ed Office Change and fee	e(s) are submitted for filing.
Please return all correspondence concern	ing this matter to the foll	lowing:
Rita Mansour Name of Person		
Boruma LLC		09 SEI
Firm/Company		D9 AUG 25 AH II: 04 ECRETARY OF STATE LLAHASSEE, FLORID
1745 Indian Wood Circ	de, Ste. 210	SET 5
Address		
Maumee, Ohio, 4353 City/State and Zip Code	7	STATE LORIDA
rmansour@tmpfa.cor	m	
rmansour@tmpfa.cor E-mail address: (to be used for future annual rep	ort notification)	
For further information concerning this n	natter, please call:	
Rita Mansour	at (419)	740-6112
Name of Person	Area Code	e & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registration Division of P.O. Box 63	Corporations
Enclosed is a check for the follo	wing amount:	
\$25 Filing Fee	√ \$55 Filing	g Fee & Certified Copy

TO: Registration Section

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.

Name of the limited liability company:	Boruma LLC
2. (a) Principal office address of limited liability company	1745 Indian Wood Circle, Ste. 2
_[✓] (<u>Note: MUST BE STREET ADDRESS</u>)	Maumee, Ohio, 43537
(b) Mailing address of limited liability company:	1745 Indian Wood Circle, Ste. 210
(Note: MAY BE POST OFFICE BOX)	Maumee, Ohio, 43537
May 31, 2007	L07000057226
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on the	the records of the Florida Dept. of State:
Registered Agent:	Karen Bothwell
Registered Office Address:	3281 Crossings Ct., D107 Bonita Springs, FL 34134
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> <u>NEW</u> Registered Agent:	W Registered Office address: Rita Mansour, Managing Member
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	c/o Denise Larson 4801 Bonita Bay Blvd Bonita Springs ,FL34134
If the limited liability company is not organized under the longing that after the change or changes are made, the Fland the business office of the registered agent will be ident 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	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization
Allan M. Rubin	
Printed or typed name of signee	-
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proand I am familiar with and accept the obligations of my pochapter 508, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office whas been notified in writing of this change.
Signature of Registered Agent	

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

1. A. J. E. .