L07000057574

(Re	equestor's Name)	
(Address)		
		
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	• #j
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Document Number)		
(5)	oddinent (vaniber)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



200173376582

04/07/10--01006--021 **25.00

10 APR -7 AMII: 33 SECKETARY OF STATE TALLAHASSEE: FLORID

COVER LETTER			
TO: Registration Section Division of Corporations			
	Home Florido LLC ed Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this r	matter to the following:		
Upo Schulz Name of Person			
A DREAM HOME FLORIC Firm/Company	lo, LLC		
8951 BONITO, Black Rol SE :	<u>#525</u> -281		
BONTON SPRINGS, FL. City/State and Zip Code ()	34/35		
E-mail address: 66 be used for future annual report notificat	fl. com		
For further information concerning this matter, please call:			
Mame of Person at (239 451 · 4545 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		

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.

-g, a. a, sj z	,
1. Name of the limited liability company:	eam Home Floreda, LLC
2 (a) Principal office address of limited liability company:	
(Note: MUST BE STREET ADDRESS)	65 EMERALD WOODS DR
(b) Mailing address of limited liability company:	Naples FL 34108
(Note: MAY BE POST OFFICE BOX)	8951 BONITO, Beach Rd. SE #525-281
may 31, 2007.	#525-281 BONITA SPRINGS F1.34135 L07000057574
3. Date of filing registration in Florida 4	Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
Registered Agent:	N/A PER 5
Registered Office Address:	SAME as above I
	MO P
	FSI
(b) Enter name of NEW Registered Agent and/or NEW	Registered Office address
NEW Registered Agent:	N/A P
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8951 BONITO BEACH Rd.SE #525-281
MOST BE TECHNOTISTICSET TODAY	BONHO SPRINGS ,FL 34/35.
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identicability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company.	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of organization
Signature of a member or authorized opresentative of a member	•
Olga Schulz Printed or Upped name of signee	
I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the project of any familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.