## L07000063860

(Requestor's Name)		
. (Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
· 		
Special Instructions to Filing Officer:		
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Office Use Only



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OR THE 29 PH 4: 00

J. BRYAN
DEC 3 0 2008
EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Baron (Name	ENTERPRISES, LLC of Limited 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	g this matter to the following:	
Edwin J. Bar	012	
Baran Enterpr (Firm/Company)	ises, LLc	OS DEC.
2262 Chathan Pl	ace OR.	OBDEC 29 PH 4: 00
ORLando FL 32 (City/State and Zip Code)	824	00
For further information concerning this mat	tter, please call:	
Edwin Baron (Name of Person)	at (32\) 377-9244  (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 follow	ing 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 60 company submits the following statement in order to in the State of Florida.	8.508, Florida Statutes, the undersigned limited liability change its registered office or registered agent, or both,
1. Name of the limited liability company:	aron Enterprises, LLC
2. (a) Principal office address of limited liability com (Note: MUST BE STREET ADDRESS)	pany: 2262 Chatham Place DR, ORlando FL 32824
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2262 Chatham Place OR ORlando Fr 32824
3. Date of filing/registration in Florida	<u>LØ7ØØØ</u> 63860 4. Document number
5. (a) Registered Agent and Registered Office shows	2
Registered Agent:	Eduin Baron 2 3
Registered Office Address:	1563 Glenhauer Cr. 34761
(b) Enter name of NEW Registered Agent and/or	NEW Registered Office address:
<u><b>NEW</b></u> Registered Agent:	Edwin J. Baron
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2262 Chatham Place DR. ORLANDO ,FL 32824
that after the change or changes are made, the Florida office of the registered agent will be identical. Or, in hereby confirmed that the change(s) was/were authoriliability company or as otherwise provided in the articlimited liability company:	the case of a Florida limited liability company, it is zed by an affirmative vote of the members of the limited
(Signature of a member or authorized epresentative of a member)	
(Printed or typed name of signee)	<del></del>
I hereby accept the appointment as registered agent of comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my post F.S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been not	and agree to act in this capacity. I further agree to be proper and complete performance of my duties, and I ition as registered agent as provided for in Chapter 608, oct a change in the registered office address, I hereby tified in writing of this change.
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00