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## **COVER LETTER**

. TO: Registration Section Division of Corporations		
•		
SUBJECT: DBM Enterprises, LLC (Name of Limit	ed Liability Company)	
(* * * * * * * * * * * * * * * * * * *	- Landing Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
	7007 TALL	
Dale A. Dettmer	TI III I 3	
(Name of Person)	AUG 13 P CRETARY OF AHASSEE, F	
Krasny and Dettmer	' · · · · · · · · · · · · · · · · ·	
(Firm/Company)	2: 15 STATE LORIDA	
304 S Harbor City Blvd, Suite 201		
(Address)		
Melbourne, FL 32901		
(City/State and Zip Code)		
For further information concerning this matter, plants	ease call:	
, , , , , , , , , , , , , , , , , , ,		
	321 723-5646	
(Name of Person)	(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:		
<b>✓</b> \$25 Filing Fee	\$55 Filing Fee & Certified Copy	

INHS18 (8/05)

## 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, liability company submits the following statement in order to agent, or both, in the State of Florida.	Florida Statutes, the undersigned limited change its registered office or registered		
. 1. The name of the limited liability company is: DBM Enterpris	es, LLC		
2. The mailing address of the limited liability company is: 52	1 Lanternback Island Drive		
Satellite Beach, FL 32937	el		
July 19, 2007	L07000074701		
	l. Document number		
5. The name of the registered agent and the registered office at Florida Department of State:	idress as shown on the records of the		
Dale A. Dettmer			
Name	SECRETARY TALLAHASSE		
Melbourne, FL 32901 City, State and Zip			
Melbourne, FL 32901	SS		
City, State and Zip			
6. The name and address of the new registered agent and/or office:			
Frederick F. Meyers, Jr.	Dri o		
Name 521 Lanternback Island Drive			
Florida street address (P.O. Box N	OT acceptable)		
Satellite Beach FL 32937			
City, State and Zip			
If the limited liability company is not organized under the laws confirmed that after the change or changes are made, the Floriand the business office of the registered agent will be identical liability company, it is hereby confirmed that the change(s) was of the members of the limited liability company or as otherwise or the operating agreement of the limited liability company.  (Signature of a member or authorized representative of a member)	da street address of the registered office  l. Or, in the case of a Florida limited as/were authorized by an affirmative vote		
Frederick F. Meyers, Jr.	_		
(Printed or typed name of signce)			
I hereby accept the appointment as registered agent and agre comply with the provisions of all statutes relative to the proper and I am familiar with and accept the obligations of my positic Chapter 608. F.S. Or, if this document is being filed to merely address of hereby confirm that the limited liability company has the company has the confirmal than the confirmal t	e to act in this capacity. I further agree to and complete performance of my duties, on as registered agent as provided for in reflect a change in the registered office as 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**