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(Requestor's Name)			
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(Ci	ty/State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL,	
(Business Entity Name)			
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(Document Number)			
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J. BRYAN

NOV - 8 2012

EXAMINER

COVER LETTER .

TO:	Registration Section Division of Corporations	
SUB		N. Lincoln Avenue, LLC Limited Liability Company
Dear	Sir or Madam:	• • • • • • • • • • • • • • • • • • • •
The e	enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Pleas	e return all correspondence concernir	ng this matter to the following:
	Brian J. Fender	
	Name of Person	2012 HOV -8 PH 1:57 SECRETARY OF STATE TALLAHASSEE, FLORID
	GrayRobinson, P.A.	
	Firm/Company	SSEE, OF
	P. O. Box 3324	من المناسبة
	Address	ORIDA
	Tompo El 22601 222	4
	Tampa, FL 33601-3324 City/State and Zip Code	1
	brian.fender@gray-robinsor E-mail address: (to be used for future annual repo	t notification)
For f	further information concerning this ma	atter, please call:
	Brian Fender	at (<u>813</u>) <u>273-5000</u>
	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 follow	ving 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.

1. Name of the limited liability company:	5910 N. Lincoln Avenue, LLC	
2. (a) Principal office address of limited liability of	company: 5910 N. Lincoln Avenue	
(Note: MUST BE STREET ADDRESS)	Tampa, FL 33614	
(b) Mailing address of limited liability compan	y: 399 So. Atlantic Avenue	
(Note: MAY BE POST OFFICE BOX)	Cocoa Beach, FL 32931	
07/24/2007	L07000076328	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office sh	own on the records of the Florida Dept. of State:	
Registered Agent:	Brian Fender	
Registered Office Address:	201 N. Franklin Street Suite 2200 Tampa, FL 33602 US	
	Tampa, TE 05002 00	
(b) Enter name of NEW Registered Agent and	i/or NEW Registered Office address:	
NEW Registered Agent:	Brian Fender	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	401 E. Jackson Street Suite 2700 Tampa ,FL 33602	
or the members of the limited liability company or or the operating agreement of the limited liability of the limited liability of a member of a membe	der the laws of the State of Florida, it is hereby le, the Florida street address of the registered office be identical. Or, in the case of a Florida limited hange(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization company.	
Printed or typed name of signee		
I hereby accept the appointment as registered age comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being file address, I hereby confirm that the limited liability of	nt and agree to act in this capacity. I further agree to o the proper and complete performance of my duties, of my position as registered agent as provided for in ed to merely reflect a change in the registered office company has 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