

LO7000088812

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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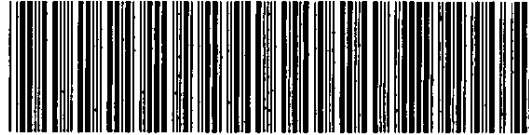
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Witan Walczak, LLC  
(Name 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 this matter to the following:

Stephanie W. Walczak  
(Name of Person)

Witan Walczak, LLC  
(Firm/Company)

P.O. Box 31809  
(Address)

Palm Beach Gardens, FL 33420  
(City/State and Zip Code)

For further information concerning this matter, please call:

Stephanie W. Walczak at (561) 315-0784  
(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:**

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

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**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: Witan Walczak, LLC

2. (a) Principal office address of limited liability company: 2979 PGA Blvd.  
Palm Beach Gardens, FL  
33410  
*(Note: MUST BE STREET ADDRESS)*

(b) Mailing address of limited liability company: 450 Alton Rd. #804  
Miami Beach, FL 33139  
*(Note: MAY BE POST OFFICE BOX)*

8/29/07  
3. Date of filing/registration in Florida

G0734490037  
4. Document number L07000088812

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Stephanie Walczak

Registered Office Address: 2979 PGA Blvd  
Palm Beach Gardens, FL 33410

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(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:** Stephanie Walczak

**NEW Registered Office Address:** 4225 East Main Street  
Jupiter, FL 33458  
*(MUST BE FLORIDA STREET ADDRESS)*

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
(Signature of a member or authorized representative of a member)

Stephanie Walczak  
(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]  
(Signature of Registered Agent)

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