7000100541

(Requestor's Name)								
	,							
(Address)								
(13.333)								
(Address)								
(City/State/Zip/Phone #)								
		<u></u>						
PICK-UP	☐ WAIT	MAIL.						
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(Bu	ısiness Entity Nar	me)						
(Do	ocument Number)							
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								
- CF - CK								

Office Use Only



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K. SALY EXAMINER

JUN 15

COVER LETTER

TO:

INHS18 (2/14)

Registration Section

Divi	sion of Corporations				
SUBJECT:	Redefined Development LLC				
	Name of Limited Liability Company				
Dear Sir or N	∕ladam:				
The enclosed	d Registered Agent/Registered Off	ice Change a	nd fee(s) are submitted for filing.		
Please return	all correspondence concerning th	is matter to t	he following:		
Michelle S	stallings				
	Name of Person				
RALS					
	Firm/Company				
1013 Cent	tre Road, Suite 403S				
	Address				
Wilmington	n, DE 19805		•		
	City/State and Zip Code				
mstallings	@inclegal.com				
E-mail	address: (to be used for future ann	ual report no	tification)		
For further in	nformation concerning this matter,	please call:			
Michelle S	tallings	800 at (400-6650		
	Name of Person	\	Area Code & Daytime Telephone Number		
Regi Divi Clift 2661	stration Section sion of Corporations on Building Executive Center Circle ahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Encl	losed is a check for the following	amount:			
2 \$2	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 605.0114 or 605.0116, 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.

. (a)		(b)				
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address	illing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	670 E Airy Street	67	670 E Airy Street			
	Norristown, PA 19401	orristown, PA 19				
	Nomstown, FA 19401		Nothstown, 1 A 19401			
	10/03/2007	L07	000100541			
3.	Date of filing/registration in Florida	4.	Document r	number		
i. (a)				•		
, (u)	Registered Agent and Registered Office shown on the records	s of the Florida Dept	of State:			
	Marcelus, Jaclain					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	329 NE 57th Street			FIL JUN 13		
	Miami	_{FL} 33137		競売 る		
		.r.L				
(b)						
` '	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regists</u>	ered Office address	:	1: 29		
	Registered Agents Legal Services, LLC			Wit o		
	NEW Registered Office Address:					
	155 Office Plaza Drive, Suite A P.O. Box	··· <u>-</u> · ·				
	Tallahassee	32301				
	- I dildild55ee	, FL_32301				
the clagen was/ the a	limited liability company is not organized under the hange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of	of the registered I liability compar rs of the limited I whe limited liabili	nothice and the obstany, it is hereby confiability company or ity company.	irmed that the change(s)		
	nature of a member or multiorized representative of a member			·		
nong	reby accept the appointment as registered agent and isions of all statutes relative to the proper and complete bligations of my position as registered agent as proverely reflect a change in the registered office address led in writing of this change. MICH	agree to act in the ete performance ided for in Chapt I hereby confirt ULL U ASA		er agree to comply with the om familiar with and accept this document is being filed ability company has been		
			/	•		