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C. LEWIS

SEP 2 2 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	••	
	ster Oriental Rugs & Antiques, LLC	
Name	of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	red Office Change and fee(s) are submitted for filing.	
Please return all correspondence concern	ning this matter to the following:	
Brenda S. Foster		
Name of Person		
Marilyn Foster Orie	ental Rugs + Antiques, LLC	
3543 St. Johns Avenu	<u>ue</u>	
Jacksonville, FL 3220 City/State and Zip Code	05	
fostar@comcast.net E-mail address: (to be used for future annual rep	port notification)	
For further information concerning this n	matter, please call:	
Brenda S. Foster	at (904) 387-5955	
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 follo	owing 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. liability company submits the following statement in ordagent, or both, in the State of Florida.	508, Florida Statutes, the undersigned limited ler to change its registered office or registered
1. Name of the limited liability company: Marilyn Fo	oster Oriental Rugs & Antiques, LLC
2. (a) Principal office address of limited liability compar	y: 3543 St. Johns Avenue
(Note: MUST BE STREET ADDRESS)	Jacksonville, FL 32205
(b) Mailing address of limited liability company:	3543 St. Johns Avenue
(Note: MAY BE POST OFFICE BOX)	Jacksonville, FL 32205
11/06/2007	L07000112610
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept of State:
Registered Agent:	Brenda S. Foster
Registered Office Address:	2320 Hendricks Avenue
	Jacksonville, FL 32207
(b) Enter name of NEW Registered Agent and/or NE	5m -
NEW Registered Agent:	Brenda S. Foster
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3543 St. Johns Avenue
MOST DE L'EURIDA STREET ADDRESS,	Jacksonville ,FL 32205 U.
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be identiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company.	Florida street address of the registered office nical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization
Signature of a member or authorized representative of a member	
Richard J. Foster Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address, I hereby confirm that the limited liability company.	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in the registered office my has been notified in writing of the change.
Signature of Registered Agent	LAR T
Division of Corporations, P.O. Box 6 FILING FEE:	327, Tallahassee, FL 3231 🚒 😕 🗀