

# LD7000113482

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

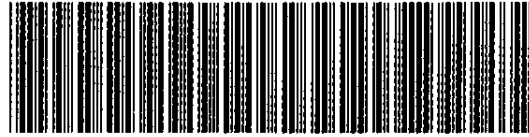
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**FILED**  
2011 MAR 30 PM 4 07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

MAR 31 2011

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 2475 BLANDING HOLDING, 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:

ROSELY W. KANNER  
Name of Person

2475 BLANDING HOLDING, LLC  
Firm/Company

1331 HERON POINT ROAD  
Address

JACKSONVILLE, FLORIDA 32223  
City/State and Zip Code

rosely.kanner@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROSELY W. KANNER at ( 904 ) 260-5020  
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

**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: 2475 BLANDING HOLDING, LLC

2. (a) Principal office address of limited liability company: 1331 HERON POINT ROAD

(Note: **MUST BE STREET ADDRESS**) 1331 HERON POINT ROAD  
JACKSONVILLE, FLORIDA 32223

(b) Mailing address of limited liability company: 1331 HERON POINT ROAD

(Note: **MAY BE POST OFFICE BOX**) 1331 HERON POINT ROAD  
JACKSONVILLE, FLORIDA 32223

11/08/2007  
3. Date of filing/registration in Florida

L07000113482  
4. Document number

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

Registered Agent: WIENER, WILLIAM, CPA

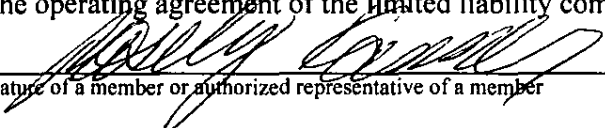
Registered Office Address: 8286 WESTERN WAY CIRCLE  
SUITE C-2  
JACKSONVILLE, FLORIDA 32256

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

**NEW Registered Agent:** ROSELY W. KANNER

**NEW Registered Office Address:** 1331 HERON POINT ROAD  
**(MUST BE FLORIDA STREET ADDRESS)** JACKSONVILLE, FL 32223

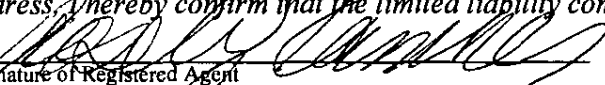
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida 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 of a member or authorized representative of a member

ROSELY W. KANNER

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, thereby confirm that the limited liability 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

FILED  
NOV 30 PM 10 07  
TALLHASSEE, FLORIDA  
SECRETARY OF STATE