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SECRETARY OF STATE

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COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	ECT:GC	olf Breeze Realty LLC.
	Name of	Limited Liability Company
Dear S	Sir or Madam:	
The e	nclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please	e return all correspondence concerning	g this matter to the following:
	Kristen Conti	
	Name of Person	
	Golf Breeze Realty LLC.	
	Firm/Company	
	13435 S. McCall Rd Suite 3	395
	Port Charlotte FI 33981 City/State and Zip Code	
E	kristen@kristenconti.con	notification)
For fu	orther information concerning this ma	tter, please call:
	Kristen conti	at (941) 270-7181
-	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
	Division of Corporations	Division of Corporations
	Clifton Building	P.O. Box 6327
	2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
	Enclosed is a check for the follow	ing 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.

- T	
1. Name of the limited liability company:	Golf Breeze Realty LLC.
2. (a) Principal office address of limited liability compan	y: Golf Breeze Realty LLC.
(Note: MUST BE STREET ADDRESS)	13435 S. McCall Rd Suite 395 Port Charlotte FL 33981
(b) Mailing address of limited liability company:	Golf Breeze Realty, LLC
(Note: MAY BE POST OFFICE BOX)	13435 S. McCall Rd Suite 3955 Port Charlotte FL 339815
11/08/2007	ပ္တို္င္သာ ယ န L07000113 53 7 > [၂]
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Deg Af State:
Registered Agent:	Fred Beyer
Registered Office Address:	Golf Breeze Realty LLC. 13435 S. McCall Rd Suite 395 Port Charlotte FL 33981
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	David Conti
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Golf Breeze Realty LLC. 13435 S. McCall Rd Suite 395 Port Charlotte FL 33981 ,FL 33981
If the limited liability company is not organized under the confirmed that after the change or changes are made, the hand the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and a strength or the limited liability company.	Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization y.
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my pochapter 608. F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability company	oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.
Signature of Registered Agent	