## L07000117081

|                                       | • • •  |
|---------------------------------------|--|
| (Requestor's Na                       | ame)   |
| (Address)                             |  |
| (Address)                             | N. J. S. |
| (City/State/Zip/l                     | Çhone #)                                     |
| PICK-UP WAI                           | T MAIL                                       |
| (Business Entit                       | y Name)                                      |
| (Document Nur                         | mber)  |
| Certified Copies Certif               | icates of Status                             |
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FALLAHISSEE, FLORIDA

C. LEWIS

MAY 3 0 2012

EXAMINER

| TO: Registration Section Division of Corporations  | · News  |  |
|--|---|--|
|  | ST LLC<br>d 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 n   | natter to the following:  |  |
|  |   |  |
| Robert Bailey  | **************************************  |  |
| Name of Person   |   |  |
|  |   |  |
| Firm/Company   |   |  |
| 401 E Las Olas Blvd Suite 130-521  |   |  |
| Address  |   |  |
| Ft Lauderdale, FL 33301 City/State and Zip Code  |   |  |
| City/State and Zip Code  |   |  |
| goodearthpropman@earthlink.net E-mail address: (to be used for future annual report notificati   | on)   |  |
| For further information concerning this matter, please call:   |   |  |
| Debert Deiter  | 054   |  |
| Robert Bailey at (at (   | 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

| 508, Florida Statutes, the undersigned limited  |
|---|
| er to change its registered office or registered  |
| NW 116 5T LCC   |
| y: 401 East Las Olas Blvd   |
| Suite 130-521<br>Ft Lauderdale, FL 33301  |
| 401 East Las Olas Blvd  |
| Suite 130-521 Ft Lauderdale, FL 33301   |
| 1. Document number  |
| the records of the Florida Dept a States  |
| Robert Bar 12   |
| 14831NW77e  |
| nimi / Ft 33168   |
|   |
| W Registered Office address:  |
| W Registered Office address: Robert Bailey  |
|   |
| Robert Bailey  401 East Las Olas Blvd Suite 130-521   |
| A01 East Las Olas Blvd Suite 130-521 Ft Lauderdale ,FL33301  laws of the State of Florida, it is hereby 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.                |
| Robert Bailey  401 East Las Olas Blvd Suite 130-521 Ft Lauderdale ,FL33301  laws of the State of Florida, it is hereby Florida street address of the registered office tical. Or, in the case of a Florida limited by was/were authorized by an affirmative vote rwise provided in the articles of organization |
|   |

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