## 07000120439

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PICK-UP	. WAIT MAIL			
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(	Business Entity Name): 11 38 31 5			
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Special Instructions to Filing Officer:				
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SECRETARY OF STATE TALLAHASSEE, FLORID!

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M. THOMAS

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EXAMINER

## COVERLETTER

TO:	Registration Section Division of Corporations					
SUBJI	ECT: Lev				t, LLC ompany	<del></del>
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered	Office	Change	and fe	ee(s) are submitted for filing.	
Please	return all correspondence concerning	g this m	atter to	the fo	ollowing:	
	Gregory A. Duggan	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		_		i.
	Name of Person				SECTALL	7
	Level Development, LLC		<del></del>	_	RETAR	FILED MO:50
	Firm/Company				SEEF	星で
	501 Henkel Circle				FLOR	(). Si
	Address				Dr.	n 0
	Winter Park, FL 32789 City/State and Zip Code			<del>_</del>		
E-r	greg.duggan@leveldevelopers nail address: (to be used for future annual report	s.com notification	on)	<del>-</del>		
For fur	ther information concerning this mat	ter, ple	ase call			
	Gregory A. Duggan	at (_	321		377-2615	
	Name of Person		•	Area Co	de & Daytime Telephone Number	
	STREET/COURIER ADDRESS: Registration Section		MAILING ADDRESS: Registration Section			
	Division of Corporations Division of Corporations					
	Clifton Building 2661 Executive Center Circle				5327 e, Florida 32314	
• •	Tallahassee, Florida 32301		1 411		o, 1 torida 32311	
•	Enclosed is a check for the followi	ng amo	unt:			* * * * * * * *
[	\$25 Filing Fee		\$5	5 Filir	ng Fee & Certified Copy	

## SEATEMENT 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:	Level Development, LLC					
2. (a) Principal office address of limited liability compan	y: 5232 Baskin Street					
(Note: MUST BE STREET ADDRESS)	Orlando, FL 32814					
(b) Mailing address of limited liability company:	5232 Baskin Street					
(Note: MAY BE POST OFFICE BOX)	Orlando, FL 32814					
12/03/07	L07000120439					
3. Date of filing/registration in Florida	4. Document number					
5. (a) Registered Agent and Registered Office shown on the records of the Florida Depe of State:						
Registered Agent:	Gregory A. Duggan					
Registered Office Address:	Orlando, FL 32814 % ₹					
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:	W Registered Office address: 5					
<u>NEW</u> Registered Office Address: (MUST_BE FLORIDA STREET ADDRESS)	501 Henkel Circle					
	Winter Park ,FL 32789					
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	_					
Printed or typed name of signee	_					
I hereby accept the appointment as registered agent and a 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 me address, I hereby confirm that the limited liability company.	ngree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in orely reflect a change in the registered office y has been notified in writing of this change.					

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

Signature of Registered Agent