L07000120593

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T. HAMPTON

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EXAMINER

COVER LETTER

Division of Corporations		
	m Sorvices, LLC.	
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:		
EVA GORDON Name of Person		
GORDON PREMIUM SERVICES, LI	LC.	
3829 RUNNING WATERS DRIVE	<u>: </u>	
ORLANDO, FL 32837 City/State and Zip Code		
evagordon07@gmail.com E-mail address: (to be used for future annual report notific	ration)	
For further information concerning this matter, please call:		
EVA GORDON at Name of Person	(407) 575-7806 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	

TO: Registration Section

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: GORDON PREMIUM SERVICES, LLC		
2. (a) Principal office address of limited liability company	3829 RUNNING WARERS DR	
(Note: MUST BE STREET ADDRESS)	ORLANDO, FL 32837	
(b) Mailing address of limited liability company:	3829 RUNNING WATERS DR	
(Note: MAY BE POST OFFICE BOX)	ORLANDO, FL 32837	
DEC 4, 2007 3. Date of filing/registration in Florida	L07000120593 4. Document number	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: EVA M. GORDON		
Registered Office Address:	13538 VILLAGE PARK DR #170 ORLANDO FL 32837	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: NEW Registered Office Address: 13538 VILLAGE PARK DRIVE		
(MUST BE FLORIDA STREET ADDRESS)	ORLANDO ,FL 32837	
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fland the business office of the registered agent will be identified liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherworthe operating agreement affitte limited liability company. Signature of a member or authorized representative of a member EVA M. GORDON Printed or typed name of signee I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the province of amount of the province of the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	orida street address of the registered office of the registered office of the registered of the regist	

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

Signature of Registered Agent