

DOCUMENT# L080000004691

Entity Name: BOCA BUSINESS CENTER DEVELOPERS, LLC

New Principal Place of Business:

Current Mailing Address:**New Mailing Address:**

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date _____

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: GRUPP, MATTHEW P
Address: 842 W. KATHLEEN AVENUE
City-St-Zip: COEUR D'ALENE, ID 83815

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MATTHEW P. GRUPP MGR 04/18/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date