LD800005413

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone	#)
P 🔲 WAIT	MAIL
(Business Entity Name	e)
(Document Number)	
Certificates	of Status
	(Address) (City/State/Zip/Phone WAIT (Business Entity Name)

Special Instructions to Filing Officer:

L. SELLERS

FEB - 9 2009

EXAMINER

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Windproof Homes, LLC (Name	of Limited 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	g this matter to the following:	
TIM COSSEY		
(Name of Person)		
(Firm/Company)		
1651 Whitfield Ave Building 6-A (Address)	10-72-7-11-7-1	
`,		
Sarasota, FL 34243 (City/State and Zip Code)		
For further information concerning this mat	tter, please call:	
TIM COSSEY	at (941) 232-3725	
(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 2661 Executive Center Circle Tallahassee, Florida 32301	P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the followi	ing amount:	
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	

INHS18 (5/08)

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: Windproo	f Homes, LLC		
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	any: 2768 Harvest Drive Sarasota, FL 34240		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1651 Whitfield Ave Building 6-A Sarasota, FL 34243		
01/16/2008 3. Date of filing/registration in Florida	L08000005413 4. Document number		
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept.	. of State:	
Registered Agent:	Edgar Winkler		
Registered Office Address:	2768 Harvest Drive Sarasota, FL 34240		
(b) Enter name of NEW Registered Agent and/or N	NEW Registered Office address:		
NEW Registered Agent:	TIM COSSEY		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1651 Whitfield Ave Building 6-A		
(INCOLUE L'ECREDIT GLACIEST FIDENCESS)	Sarasota 🔳	,FL <u>34243</u>	
If the limited liability company is not organized under that after the change or changes are made, the Florida st office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the article limited Hability company. (Signature of a member or authorized representative of a member) (Printed or typed name of signee)	treet address of the registered offic te case of a Florida limited liability and by an affirmative vote of the me	ce and the business y company, it is embers of the limited	
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my positions. Or, if this document is being filed to merely reflect confirm that the limited liability company has been notif	nd agree to act in this capacity. If proper and complete performancion as registered agent as provide tachange in the registered office fied in writing of this change.	further agree to e of my duties, and I d for in Chapter 608, address, I hereby	
(Signature of Registered Agent) Division of Corporations, P.O. B FILING F	Box 6327, Tallahassee, FL 32314	PIL 09 FEB -6 SECKLIANSS	
INHS18 (05/08)			