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2012 MAY 29 AM 9: 52 SECRETARY OF STATE TALLAHASSEE FI OBJE

J. SAULSBERRY EXAMINER MAY 30 2012

## **COVER LETTER**

SUBJECT: 3422 wast Breweld Blob NUC 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 this matter 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  Goodearthpropman@earthlink.net  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Robert Bailey Name of Person  Area Code & Daytime Telephone Number  STREET/COURIER ADDRESS: Registration Section Division of Corporations Cliffon Building P.O. Box 6327	Name of Limited Liability Company ar Sir or Madam:  e enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.  ease return all correspondence concerning this matter to the following:    Robert Bailey	TO: Registration Section Division of Corporations
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Enclosed is a check for the following amount:	Enclosed is a check for the following amount:	Enclosed is a check for the following amount:
\$25 Filing Fee & Certified Copy	\$25 Filing Fee & Certified Copy	\$25 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 th	ne limited liability company:	3422	west	Browned	Blod	LC	<del>-</del>
2. (a) Princip	oal office address of limited liabi	lity company:		401 East Las	Olas Bl	lvd	
( <u>Note</u>	: MUST BE STREET ADDRE.		Suite 130-5 Ft Lauderda	21 ale, FL 33301			<u>-</u>
(b) Mailin	g address of limited liability con	npany:	<u>401 E</u>	East Las Olas	Blvd		
( <u>Note</u>	: MAY BE POST OFFICE BO		Suite 130-5 Ft Lauderda	21 ale, FL 33301			- -
3. Date of fili	ing/registration in Florida	4	Lo 80 . Document	000 143	:45		-
5. (a) Regist	tered Agent and Registered Offic	e shown on th	ie records of	the Florida Dep	pt. of Stat	le:	
Regist	ered Agent:		foho	+ Baly			_
Regist	ered Office Address:		148 Mir	31 Nu 7A	e - 35/68	12 12 11 12 11 11 11 11 11 11 11 11 11 1	- -
(b) Enter r	name of <u>NEW Registered Agen</u>				TARY C	1AY 29	
<u>NEW</u>	Registered Agent:		Robert Baile	ey .	<u> </u>		
	Registered Office Address:  T BE FLORIDA STREET ADD	RESS)	<u>401 East La Suite 130-5:</u> Ft Lauderda		F	<u>ب</u> بر 301	- -
confirmed tha and the busine liability comp of the member or the operatir	liability company is not organize at after the change or changes are ess office of the registered agent cany, it is hereby confirmed that the triangle of the limited liability companing agreement of the limited liability companing agreement of the limited liability.	made, the Flowill be identiche change(s) y or as otherwity company.	orida street ad cal. Or, in the was/were autl	ldress of the reg e case of a Flor horized by an a	gistered o ida limite affirmativ	office ed e vote	
	Robert Bailey			,			
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent