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COVER LETTER

TO:	Registration Section Division of Corporations	1
SUBJ		gnolia Agency, LLC imited Liability Company
Dear S	Sir or Madam:	
The e	nclosed Registered Agent/Registered Of	ffice Change and fee(s) are submitted for filing.
Please	e return all correspondence concerning t	his matter to the following:
	Tim Gray	***************************************
	Name of Person	
	c/o Magnolia Agency, LLC Firm/Company	
	911 East Park Ave. Address	
	Tallahassee, FL 32301 City/State and Zip Code	
E-	-mail address: (to be used for future annual report no	rification)
For fu	rther information concerning this matter	r, please call:
	Gregg B. Patterson	at (<u>850</u>) <u>545-2840</u>
	Name of Person	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	g amount:
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy

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.

Name of the limited liability company:	Magnolia Agency, LLC			
2. (a) Principal office address of limited liability company	: 911 East Park Ave			
- (Note: MUST BE STREET ADDRESS)	Tallahassee, FL 32301			
(b) Mailing address of limited liability company:	911 East Park Average 29			
(Note: MAY BE POST OFFICE BOX)	Tallahassee, FL 32301 TS TO			
03/22/2010 3. Date of filing/registration in Florida	L080000201137 5.			
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
Registered Agent:	Westerlund, Jennifer D			
Registered Office Address:	3111 Stirling Road Ft Lauderdale, FL 33312			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	Gregg B. Patterson			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	911 East Park Ave Tallahassee, FL ,FL32301			
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 Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change. Signature of Registered Agent				