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T. HAMPTON SEP 2 4 2010 **EXAMINER**

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Brueck, Golosow & Kim, LLC		
Name of Li	mited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning t	his matter to the following:	
Christina Harris Schwinn, Esc	1	
Name of Person	<u> </u>	
Pavese Law Firm		
Firm/Company		
1833 Hendry Street		
Address		
Fort Myers, FL 33901	· .	
City/State and Zip Code		
Christinaschwinn@paveselaw.c	OM iffication)	
For further information concerning this matter	w włacza calli	
For further information concerning this matter	r, please can:	
Christian Hamin Cabusina	004.0407	
Christina Harris Schwinn Name of Person	at (239) 334-2195 Area Code & Daytime Telephone Number	
Name of Ferson	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following	; 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:	Brueck, Golosow & Kim, LLC
2. (a) Principal office address of limited liability comp	any: 3700 Central Avenue
(Note: MUST BE STREET ADDRESS)	Fort Myers, FL 33901
(b) Mailing address of limited liability company:	3700 Central Avenue
(Note: MAY BE POST OFFICE BOX)	Fort Myers, FL 33901
03/06/2008	L08000024197
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of State:
Registered Agent:	James P. F. Hines. Esq.
Registered Office Address:	315 S. Hyde Park Ave. Tampa, FL 33606
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> NEW Registered Agent:	
	Christina Harris Schwinn, Esq.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Pavese Law Firm 1833 Hendry Street
	Fort Myers ,FL 33901
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be id liability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	e Florida street address of the registered office
LORRaine Golosow, MD Printed or typed name of signee	MANAGEM PARTIES AND ADMINISTRATION OF THE PARTIES AND ADMINISTRATION OF TH
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address? I hereby confirm that the limited liability comp	· · · · · · · · · · · · · · · · · · ·
Signature of Registered Agent	S IC
Division of Corporations, P.O. Box FILING FEE	: \$25.00
INHS18 (05/08)	AH IO