108000050089

		,		
(Requestor's Name)				
(Address)				
(Address)				
(r tu				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(D.	Futte Nam			
(Bu	isiness Entity Nam	ne)		
(Do	cument Number)	,		
Certified Copies	Certificates	of Status		
	_			
Special Instructions to Filing Officer:				
	•			

Office Use Only



200185847042

09/27/10--01038--002 **25.00

10 SEP 27 PM DO OO SECRETARY OF STATE

D. BRUCE

SEP 28 2010

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporation	S						i	
SUB	JECT:	John R.	. Mentz	er, I	III, Charte	ered			_
•		Name of L	imited L	abili	ty Company	<i>1</i>			
Dear	Sir or Madam:								
The	enclosed Registered Agen	/Registered O	office Cha	inge	and fee(s) a	re submitted	for filing	g.	
Pleas	se return all correspondence	e concerning	this matte	er to	the followin	ıg:			
	John R. M	entzer, III			_				
	Name of Po	erson							
	John R. Mentzer		ed		_				
	Firm/Comp	any							
	6151 Lake Osprey Address	Drive, 3rd F	loor				FALLAH	10 SEJ	Altron
	Sarasota, Flo				_		TARY OF ASSEE, FI	10 SEP 27 PH @ 00	T
john@mentzer-law.com E-mail address: (to be used for future annual report notification)			_		STATE ORIDA	00	C		
For	further information concer	ning this matt	er, please	call	:				
	John R. Mentzer	111	_ at (<u></u>	<u> 41</u>) Area Code & D	373-132			_
	STREET/COURIER A	DDRESS:			ILING ADI	,			
	Registration Section				gistration Sec				
	Division of Corporations Clifton Building				rision of Corp J. Box 6327	ocations			
	2661 Executive Center C	tircle		-	lahassee, Flor	rida 32314			
	Tallahassee, Florida 323								
	Enclosed is a check for	r the followin	ng amou	nt:					
	\$25 Filing Fee		٢	\$5	55 Filing Fe	e & Certified	l 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 608.50 liability company submits the following statement in order agent, or both, in the State of Florida.	8, Florida Statutes, the undersigned limited to change its registered office or registered				
1. Name of the limited liability company:	John R. Mentzer, III				
2. (a) Principal office address of limited liability company	6151 Lake Osprey Drive, 3rd Floor				
(Note: MUST BE STREET ADDRESS)	Sarasota, Florida 34240				
(b) Mailing address of limited liability company:	6151 Lake Osprey Drive, 3rd Floor				
(<u>Note: MAY BE POST OFFICE BOX</u>)	Sarasota, Florida 34240				
03/24/2008	L08000030029				
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:	John R. Mentzer, III				
Registered Office Address:	4946 25th Street West, #103 Bradenton, Florida 34207				
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV NEW Registered Agent:</u> NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	6151 Lake Osprey Drive, 3rd Floor				
(MUST BE FEORIDA STREET ADDRESS)	Sarasota ,FL34240				
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 timited 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 heriber or authorized representative of a member John R. Mentzer, III Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to amongly with the provisions of all statutes relative to the proper and complete performance of my duties, and ham tendition with and accept the obligations of my position as registered agent as provided for in Chapter 108, F.S. Or, if this document is being filed to merely reflect a change in the registered office address I are eby confirm that the limited liability company has been notified in writing of this change.					
than tamiliar with and accept the obligations of my po Chapter 668, F.S. Or, if this document is being filed to me andress Thereby on firm that the limited liability compan Signature of Registered Agent	sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.				
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00					
FILING FEE: \$45.00					

INHS18 (05/08)