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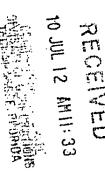
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B. KOHR
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EXAMINER

SECRETARY OF STATE ON VISION OF CORPORATIONS

10 JUL 12 PM 24 11

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173

FILING COVER SHEET ACCT. #FCA-14

CONTACT: **MICHELE HOLDEN** DATE: 07/12/2010 **REF. #:** RA3802.128568 CORP. NAME: A1A ATLANTIC KEYS, LLC () ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT () ARTICLES OF DISSOLUTION () ANNUAL REPORT () TRADEMARK/SERVICE MARK () FICTITIOUS NAME () FOREIGN QUALIFICATION () LIMITED PARTNERSHIP () LIMITED LIABILITY () REINSTATEMENT () MERGER () WITHDRAWAL () CERTIFICATE OF CANCELLATION (XX) OTHER: CHANGE OF REGISTERED AGENT STATE FEES PREPAID WITH CHECK# 5 3558 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$

() CERTIFICATE OF GOOD STANDING

(XX) PLAIN STAMPED COPY

Examiner's Initials

PLEASE RETURN:

() CERTIFIED COPY

() CERTIFICATE OF STATUS

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:	A1A ATLANTIC KEYS,	LLC	
2. (a) Principal office address of limited liability compa	any:	6	
(Note: MUST BE STREET ADDRESS)	115 LAZELL STREET HINGHAN MA 02043	72	
(b) Mailing address of limited liability company:	(************************************	OF S	
(Note: MAY BE POST OFFICE BOX)	115 LAZELL STREET HINGHAN MA 02043		
04/10/2008	L080000367	26	
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida De	pt. of State:	
Registered Agent:	Corporate Creations Net	work, Inc.	
Registered Office Address:	11380 PROSPERITY FA #221E	RMS ROAD	
•	PALM BEACH GARDEN	S FL 33410 US	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	NEW Registered Office addres	<u>ıs</u> :	
NEW Registered Agent:	CORPDIRECT AGENTS, INC.		
NEW Registered Office Address:	515 EAST PARK AVENU	JE	
(MUST BE FLORIDA STREET ADDRESS)	TALLAHASSEE	,FL <u>32301</u>	
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			
MICHELE HOLDEN Printed or typed name of signee	· .		
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	d agree to act in this capacity proper and complete performan position as registered agent as merely reflect a change in the r any has been notified in writing	I further agree to nce of my duties, provided for in egistered office of this change.	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00