L08000045441

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								

Office Use Only



700200346447

04/11/11--01035--021 **25.00

FILED

11 APR II PH 2: 43

SECRETARY OF STATE

J. BRYAN

APR 1 2 2011

EXAMINER

COVER LETTER

Division of Co	rporations					
SUBJECT:	Maximum Name of			anagement ty Company	, LLC.	
Dear Sir or Madam:				·yy		
The enclosed Register	ed Agent/Registered (Office C	hange a	and fee(s) are	submitted fo	or filing.
Please return all corre	spondence concerning	this ma	tter to 1	the following:	:	•
		٠,				
	lan S. Warman Name of Person			_		
Maximum Pr	operty Managemen Firm/Company	t, LLC.	· , <u>.</u>	_		11 APR
1411 1 2011 1	O. Box 610275		,		3	TASSEE OF THE PROPERTY OF THE
	Address			,		PH 2: 43
	no Beach, Fl. 3306 /State and Zip Code	1		-		2 E
E-mail address: (to be t	tymgtasw@aol.com sed for future annual report i	1 notification)	-		
For further information	n concerning this matt	ter, pleas	se call:			,
Alan S.	Warman Person	_ at (954	_) .rea Code & Dayti	755-8427	Jumber
STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, Flo	oorations Center Circle		Regi Divis P.O.	LING ADDR stration Section sion of Corpora Box 6327 hassee, Florida	n ations	
Enclosed is a	check for the following	ng amou	ınt:			
 ✓ \$25 Filing F	ee	ĺ	S55	Filing Fee &	Certified C	opv

TO: Registration Section

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.	Nar	Name of the limited liability company: Maximum Property Management, LLC.					
2. (a) Principal office address of limited liability company			040.0 (1.5.1.1112.1				
(b)				Pompano Beach, Fl. 33062			
				P.O. Box 610275			
		(Note: MAY BE POST OFFICE BOX)		Pompano Beach, Fl. 33	061		
_		February 2011		L08000045	441		
3.	Dat	e of filing/registration in Florida	2	1. Document number			
5.	(a)	Registered Agent and Registered Office she	own on t	he records of the Florida D	Pept. of State:		
		Registered Agent:		Alan S. Warman			
		Registered Office Address:		1940 SE 2nd Street Pol	mpano, Fl. 3306	<u>30</u>	
						_	
	(b)	Enter name of NEW Registered Agent and	l/or <u>NEV</u>	Registered Office addr	ess:		
		NEW Registered Agent:		Alan S. Warman			
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRES	aai	219 South Federal Highway			
		MUSI BE FLURIDA SIREEI ADDRES	<u> </u>	Pompano Beach	,FL33062	_	
cor and lia of or Sig	nfirm d the bility the i the o	imited liability company is not organized un ned that after the change or changes are made business office of the registered agent will be company, it is hereby confirmed that the changers of the limited liability company or operating agreement of the limited liability of the limited liability of a member or authorized representative of a member of typed name of signee Alan S. Warman or typed name of signee by accept the appointment as registered age, with the provisions of all statutes relative to the first of this document is being file of the provisions of the second in the limited liability of the provisions of the second in the limited liability of the provisions of the limited liability of the provisions of the limited liability of the provisions of the limited liability of th	le, the Flo be identi hange(s) as otherv company.	orida street address of the cal. Or, in the case of a Fl was/were authorized by an wise provided in the article	registered office orida limited affirmative votes of organization) }	
STE	natur	e of Registered Agent					

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