## 1080000045483

(F	Requestor's Name)					
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PICK-UP	☐ WAIT ☐ MAIL					
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Certified Copies	Certificates of Status					
Special Instructions to Filing Officer:						
	A. LUNT					

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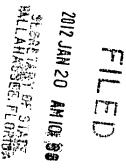
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**EXAMINER** 



100217651761

01/20/12--01024--009 \*\*75.00



## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJI			Don, Ll Liability	_C Company	
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered	Office C	hange an	d fee(s) are sub	mitted for filing.
Please	return all correspondence concernin	g this ma	tter to the	following:	
	Monique Peterson				201
	Name of Person				ZANA AHA
	RonDon, LLC				2012 JAN 20 /
	Firm/Company				AH IOE &
	114 S.E. 2nd Ave	····			
	Address				
	Boca Raton, Fl. 33432 City/State and Zip Code				
E-r	mail address: (to be used for future annual report	notificatio	n)		
For fur	ther information concerning this ma	tter, plea	se call:		
	Monique Peterson	at (	561)	869.	0300
	Name of Person			a Code & Daytime	Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Regista Division P.O. B	ING ADDRESS ration Section on of Corporation ox 6327 assee, Florida 32	ns
	Enclosed is a check for the follow	ing amo	unt:		
[	\$25 Filing Fee		\$55 1	Filing Fee & Co	ertified 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.

1. Name of the limited liability company: RonDon, LLC  2. (a) Principal office address of limited liability company: 114 S.E. 2nd Ave  (Note: MUST BE STREET ADDRESS)  (b) Mailing address of limited liability company: 114 S.E. 2nd Ave  (Note: MAY BE POST OFFICE BOX)  (Note: MAY BE POST OFFICE BOX)  Boca Raton, Fl. 33432   05/06/2008  L08000045483  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:  Registered Office Address: 114 SE 2nd Ave Boca Raton, Fl. 334327.				
(Note: MUST BE STREET ADDRESS)  (b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  (Note: MAY BE POST OFFICE BOX)  Dos/06/2008  3. Date of filing/registration in Florida  4. Document number  Registered Agent and Registered Office shown on the records of the Florida Dept. of State Registered Agent:  Registered Agent:  Registered Office Address:  114 SE 2nd Ave  Boca Raton, Fl. 33432	RonDon, LLC			
(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  Boca Raton, Fi. 33432  05/06/2008  L08000045483  4. Document number  5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State Registered Agent:  Registered Agent:  Registered Office Address:  Registered Office Address:  114 S.E. 2nd Ave Boca Raton, Fi. 33432  21 September 14 September 14 September 15 September 16 September 16 September 16 September 16 September 17 September 17 September 17 September 17 September 17 September 18 September	: 114 S.E. 2nd Ave			
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Registered Agent:  Registered Office Address:  Registered Office Address:  114 SE 2nd Ave Boca Raton, Fl. 334327				
Registered Agent:  Registered Office Address:  Registered Office Address:    114 SE 2nd Ave	3:			
Registered Office Address:  114 SE 2nd Ave Boca Raton, Fl. 334322				
52.346 <b>(5</b> )	In O			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Agent</u> : <u>Monique Peterson</u>	Monique Peterson			
NEW Registered Office Address: 114 SE 2nd Ave (MUST BE FLORIDA STREET ADDRESS) Boca Raton ,FL33	120			
If the limited liability company is not organized under the laws of the State of Florida, it is hereb confirmed that after the change or changes are made, the Florida street address of the registered and the business office of the registered agent will be identical. Or, in the case of a Florida limite liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative of the members of the limited liability company or as otherwise provided in the articles of organic or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	/ ffice ed			
Printed or typed name of signee				
I hereby accept the appointment as registered agent and agree to act in this capacity. I further comply with the provisions of all statutes relative to the proper and complete performance of my and I am familiar with and accept the obligations of my position as registered agent as provided Chapter 608, F.S. Or if this document is being filed to merely reflect a change in the registered address. I hereby confirm that the limited liability company has been notified in writing of this confirmation.	igree to duties, for in office iange.			

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