LU8000048755

(Requestor's Name)							
(Address)							
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(Address)							
(Addless)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
1							
(Document Number) ,:							
Certified Copies Certificates of Status							
Consideration to Siling Office							
Special Instructions to Filing Officer:							





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B. KOHR
NOV 9 2009
EXAMINER

DIVISION OF CORPORATIONS

0 NOV -6 PN 12: 1.6

COVER LETTER

TO:	Registration Section Division of Corporations				•	75	
						•	
SUBJ	JECT: Garrido Ventures Name of Limited Liability Company						
	name of	Limite	u Liabi.	iity Coi	mpany		
Dear !	Sir or Madam:						
The e	nclosed Registered Agent/Registered	Office	Change	and fe	e(s) are submitted	for filing.	
Please	e return all correspondence concernin	g this n	atter to	the fol	llowing:		
	Dawn Juergensen-Garric	lo		_			
	Name of Person						
	Garrido Ventures			_			
	Firm/Company						
	1616 Bear Crossing Circl	e					
	Address						
	Apopka, Fl 32703						
	City/State and Zip Code						
	dawnjgarrido@aol.com	t notificati	on)	_			
	orther information concerning this ma			l:			
		, ,					
	Dawn Garrido	at (_	407)	925-539	6	
	Name of Person			Area Coo	de & Daytime Telephon	e Number	
	STREET/COURIER ADDRESS:		MA	AILING	ADDRESS:		
	Registration Section			Registration Section			
Division of Corporations Clifton Building				Division of Corporations			
				P.O. Box 6327 Tallahassee, Florida 32314			
:	2661 Executive Center Circle Tallahassee, Florida 32301	• ,	ıạı	ianassee	e, riorida 32314	in the state of th	
٠,	Enclosed is a check for the follow	ing am	ount:			r	

\$55 Filing Fee & Certified Copy

INHS18 (5/08)

\$25 Filing Fee

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:	Garrido Ventures			
, ,				
2. (a) Principal office address of limited liability company	: 1616 Bear Crossing Circle			
(Note: MUST BE STREET ADDRESS)	Apopka, Florida 32703			
	9, 60			
(b) Mailing address of limited liability company:	- 10, 0st			
(Note: MAY BE POST OFFICE BOX)	~ · · · · · · · · · · · · · · · · · · ·			
05-15-2008	L08000048755			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:			
Registered Agent:	United States Corporation Agents, Inc.			
Registered Office Address:	325 Flamingo Road, #347			
	Pembroke Pines, Fl 33027			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent:</u> NEW Registered Office Address:	Dawn Garrido/Garrido Ventures 1616 Bear Crossing Circle			
(MUST BE FLORIDA STREET ADDRESS)				
	<u>Apopka</u> ,FL <u>32703</u>			
If the limited liability company is not organized under the l confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company Signature of a member or autholized representative of a member	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization			
Dawn Juergensen-Garrido Printed or typed name of signee	-			
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.			
Signature of Registered Agent				

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