L08000059659

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 1 3 2013 J. BRYAN

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Osprey Nest, LLO	C Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered O	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
	7 20
Name of Person	2013 FEB 12 SECRETARY TALLAHASSI
	ART E.
lurillo & Associates, P.A.	. ASS 12
Firm/Company	
5628 Central Avenue	FLORID
Address	
St. Petersburg, FL 3370	7
City/State and Zip Code	<u></u>
ciurillo@iurillolaw.com	
E-mail address: (to be used for future annual report no	otification)
For further information concerning this matter	er, please call:
Charlotte Dean	727 \ 895-8050
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS:
Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	Tananassee, Florida 32314
Enclosed is a check for the followin	g amount:

□ \$55 Filing Fee & Certified Copy

■ \$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.

	-			
1. Na:	me of the limited liability company: Osprey Nest, LLC			
2 (-)	D. (1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1			
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)		any: 907 79th Street South St. Petersburg, FL 33707		
	(NOIE: MUST BE STREET ADDRESS)	Ot. Felerabulg, 1 C 30 FOF	1 8	
			PR 3 7	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		6822 22nd Avenue North	<u> </u>	
	(Note: MAY BE POST OFFICE BOX)	#331	100	
		St. Petersburg, FL 33 71 C	N N	
06/17/200	808	L08000059659	图 3	
3. Dat	te of filing/registration in Florida	4. Document number	1:2°	
5. (a)	Registered Agent and Registered Office shown on t	he records of the Florida I	Pept. of State:	
	Registered Agent:	lurillo & Associates, P.A.		
	<u> </u>			
	Registered Office Address:	600 1st Avenue North		
		Suite 308 St. Petersburg, FL 33701		
		St. Pataisburg, FE 33701		
	NEW Registered Agent:	lurillo & Associates, P.A.		
	NEW Registered Office Address:	5628 Central Avenue		
	(MUST BE FLORIDA STREET ADDRESS)	St Datambura	EI 22707	
		St. Petersburg	,FL_33707	
confirmand the liabilit the me the ope	imited liability company is not organized under the laned that after the change or changes are made, the Flee business office of the registered agent will be identify company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise rating agreement of the limited liability company.	orida street address of the cal. Or, in the case of a Fl was/were authorized by ar	registered office orida limited affirmative vote of	
Signatur	e of a member or authorized representative of a member	-		
Camille J Printed	lurillo or typed name of signee	-		
I here comply and I a Chapte addres	by accept the appointment as registered agent and as which the provisions of all statutes relative to the pro- om familiar with and accept the obligations of my pos- er 608, F.S. Or, if this document is being filed to mer s, thereby confirm that the limited liability company	ree to act in this capacity per and complete perform ition as registered agent d ely reflect a change in the has been notified in writi	I further agree to ance of my duties, as provided for in registered office ag of this change.	
Signatur	re of Registered Agent	•		
	Division of Corporations, P.O. Box 632	7, Tallahassee, FL 3231	4	

FILING FEE: \$25.00

INHS18 (05/08)