## L08000071218

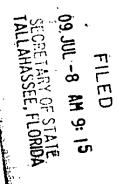
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
·					
(Business Entity Name)  (Document Number)  Certified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

Office Use Only



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07/08/09--01024--004 \*\*25.00



B. KOHR

JUL 9 2009

**EXAMINER** 

## **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJ	JECT:		RIT OF AMERICA LLC d Liability Company	<del></del> -
		Name of Emme	d Diability Company	
Dear	Sir or Madam:			
The e	nclosed Registered Agent/R	egistered Office (	Change and fee(s) are submitted for filing.	1.
Pleas	e return all correspondence o	oncerning this m	natter to the following:	
	JUAN J. AGL			8 15
	Name of Perso	n	The second secon	3
	UNITED SPIRIT OF A		ELORII ELORII	5
	Firm/Company		V S	
	•			
	10617 WALNUT V	ALLEY DR		
	Address			
	DOVNITONI DEACI	J (T) 22472		
BOYNTON BEACH, FL 33473 City/State and Zip Code				
	·		•	
F	JJAGUDELO@YA	HOO.COM	ion)	
For fi	urther information concernin	g this matter, ple	ease call:	
	JUAN J AGUDELO	at (	786 ) 277-9469	
	Name of Person		Area Code & Daytime Telephone Number	
	STREET/COURIER ADD Registration Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
	Enclosed is a check for the	ne following amo	ount:	
	\$25 Filing Fee		\$55 Filing Fee & Certified 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.

agon, or born, in the state of the tall,	
Name of the limited liability company:	UNITED SPIRIT OF AMERICA LLC
2. (a) Principal office address of limited liability co	ompany: UNITED SPIRIT OF AMERICA LL
(Note: MUST BE STREET ADDRESS)	610 W LAS OLAS BLVD, APT 1218 FT. LAUDERDALE, FL 33312-7129
(b) Mailing address of limited liability company	· Property
(Note: MAY BE POST OFFICE BOX)	
7/24/2008	L08000071248 9
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho	wn on the records of the Florida Dept. of State:
Registered Agent:	AGUDELO, JUAN J
Registered Office Address:	610 W LAS OLAS BLVD, APTO 1218 FT. LAUDERDALE, FL 33312-7129
(b) Enter name of <u>NEW Registered Agent</u> and/ <u>NEW</u> Registered Agent:	or NEW Registered Office address:
<u>NEW</u> Registered Office Address: (MUST_BE FLORIDA STREET ADDRESS)	10617 WALNUT VALLEY DR BOYNTON BEACH
	,FL_ <u>33473</u>
If the limited liability company is not organized und confirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the chof the members of the limited liability company or a or the operating agreement of the limited liability confirmed.	e, the Florida street address of the registered office
Signature of a member of authorized representative of a member	
Printed or typed name of signee	<del></del>
	t and agree to act in this capacity. I further agree to the proper and complete performance of my duties, I my position as registered agent as provided for in I to merely reflect a change in the registered office ompany has been notified in writing of this change.
Signature of Registered Agent  Division of Cornerations P.O.	Box 6327, Tallahassee, FL 32314
Division of Corporations, P.O. 1	Dux uje / , i ananassee, fl. jeji4

**FILING FEE: \$25.00** 

INHS18 (05/08)