## L08000090274

	•
(	Requestor's Name)
(.	Address)
(	(Address)
(1	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(1	Business Entity Name)
()	Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Affice LUNT
	FEB 23 2010
	EXAMINER
	·

Office Use Only

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## **COVER LETTER**

TO: Registration Division of C								
SUBJECT:	Name o			n, LLC ity Comp				
Dear Sir or Madam:								
The enclosed Registe	ered Agent/Registered	Office	Change	and fee(	s) are submi	tted for	filing.	
Please return all corr	respondence concerning	ng this m	atter to	the follo	wing:			
	John Ferrari, Jr. Name of Person			_				
	DwellGreen, LLC Firm/Company			_			SECRE TALLAH	2010 FEB 22
205 North	Orange Avenue, Su Address	uite 2N		. :.			TARY OF ST ASSEE, FLO	8 22 PM  :
	arasota, FL 34236			_				±2;
	ari@dwellgreen.com e used for future annual report on concerning this ma			<del>-</del>				
<del></del>	Ferrari, Jr.	at (_	941		284-I	-	,	
STREET/CO Registration S Division of Co Clifton Building	orporations ng e Center Circle		<b>MA</b> Reg Div P.O	AILING A gistration S ision of C b. Box 632	orporations		iber	
Enclosed is a check for the following amount:								
\$25 Filing	Fee	•	\$5	5 Filing	Fee & Certif	fied Cop	У	

## 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:	DwellGreen, LLC					
2. (a) Principal office address of limited liability compan	205 North Orange Avenue					
(Note: MUST BE STREET ADDRESS)	Suite 2N Sarasota, FL 34236					
(b) Mailing address of limited liability company:	205 North Orange Avenue					
(Note: MAY BE POST OFFICE BOX)	Suite 2N Sarasota, FL 34236					
9/15/2008	L080000090274					
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:	Steve Ellis					
Registered Office Address:	3512 S OSPREY AVENUE SARASOTA, FL 34239					
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:	W Registered Office address:					
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	205 North Orange Avenue					
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote					
John Ferrari, Jr. 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 prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.					

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