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SECRETARY OF STATE

DIVISION OF CORPORATION

MAY 3 0 2012

T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations	, c '
SUBJECT: 13730 Nu b	d Liability Company
rame of Emilie	a Blacinty Company
Dear Sir or Madam:	•
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this n	natter to the following:
Robert Bailey	
Name of Person	
Firm/Company	
r into company	
401 E Las Olas Blvd Suite 130-521 Address	
Ft Lauderdale, FL 33301 City/State and Zip Code	
goodearthpropman@earthlink.net E-mail address: (to be used for future annual report notificat	ion)
For further information concerning this matter, ple	ease call:
Robert Bailey at (954) 463-9099
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following am	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. 1. Name of the limited liability company: 2. (a) Principal office address of limited liability company: 401 East Las Olas Blvd (Note: MUST BE STREET ADDRESS) Suite 130-521 Ft Lauderdale, FL 33301 401 East Las Olas Blvd (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Suite 130-521 Ft Lauderdale, FL 33301 080001019 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: **NEW** Registered Agent: Robert Bailey 401 East Las Olas Blvd Suite 130-521 **NEW** Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) FL33301 Ft Lauderdale If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a nember or authorized representative of a member Robert Bailey Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my quities, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is heing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

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

Signature of Registered Agent