

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From: GAIL S ANDRE

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.
Account Number : 072720000036
Phone : (407) 843-4600
Fax Number : (407) 843-4444

PLEASE ARRANGE FILING OF THE ATTACHED STATEMENT OF CHANGE OF REGISTERED AGENT/REGISTERED OFFICE AND RETURN A CERTIFICATION TO ME AS SOON AS POSSIBLE. THANK YOU.

REGISTERED AGENT CHANGE

DON BASIL LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$87.50

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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: DON BASIL LLC
2. (a) Principal office address of limited liability company: 5200 VINELAND ROAD, SUITE 200
(Note: MUST BE STREET ADDRESS) ORLANDO, FLORIDA 32811
- (b) Mailing address of limited liability company: 5200 VINELAND ROAD, SUITE 200
(Note: MAY BE POST OFFICE BOX) ORLANDO, FLORIDA 32811

DECEMBER 31, 2008

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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:

GARY M. KALEITA

Registered Office Address:

215 NORTH EOLA DRIVE
ORLANDO, FLORIDA 32801

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:AVANISH AGGARWALNEW Registered Office Address:8748 SOUTHERN BREEZE DRIVE(MUST BE FLORIDA STREET ADDRESS)ORLANDO, FL 32836

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.

AVANISH AGGARWAL
(Signature of a member or authorized representative of a member)

AVANISH AGGARWAL
(Printed or typed name of signer)

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 duties, 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 being 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.

AVANISH AGGARWAL
(Signature of Registered Agent)

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

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