

LO9000005795

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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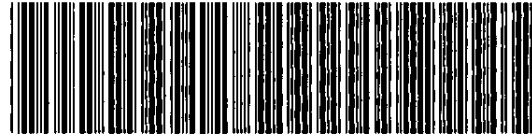
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 OCT 13 AM 10:16

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J. SAULSBERG  
EXAMINER

OCT 15 2010

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: AMDAS PROPERTIES, LLC  
Name of Limited Liability 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 matter to the following:

ERNEST W. STURGES, JR

Name of Person

GOLDMAN, TISEO & STURGES, P.A.

Firm/Company

701 JC CENTER COURT, SUITE 3

Address

PORT CHARLOTTE, FL 33954

City/State and Zip Code

ESTURGES@GTSLAWFIRM.COM

E-mail address: (to be used for future annual report notification)

FILED  
2010 OCT 13 AM 10:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

ERNEST W. STURGES, JR

Name of Person

at ( 941 )

625-6666

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 amount:

☒ \$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: AMDAS PROPERTIES, LLC

2. (a) Principal office address of limited liability company: \_\_\_\_\_

☒ (Note: **MUST BE STREET ADDRESS**) 1073 KENTON STREET  
AURORA, CO 80010

(b) Mailing address of limited liability company: \_\_\_\_\_

☒ (Note: **MAY BE POST OFFICE BOX**) 1073 KENTON STREET  
AURORA, CO 80010

01/20/2009 L09000005795  
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: THE LAW OFFICES OF NICK SPRADL

Registered Office Address: 12000 NORTH DALE MABRY HWY  
SUITE 110  
TAMPA, FL 33618

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

**NEW** Registered Agent: ERNEST W. STURGES, JR

**NEW** Registered Office Address: GOLDMAN, TISEO & STURGES, P.A.  
(MUST BE FLORIDA STREET ADDRESS) 701 JC CENTER COURT, SUITE 3  
PORT CHARLOTTE, FL 33954

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.

Dolores Yunker  
Signature of a member or authorized representative of a member

DOLORES YUNKER

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 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.

[Signature]  
Signature of Registered Agent

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

FILED  
OCT 13 AM 10:00  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE