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

DEC: -2 2010

EXAMINER

Office Use Only

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11/29/10--01024--023 **55.00

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT:	CGAYRES LLC
Na	ume of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Regis	stered Office Change and fee(s) are submitted for filing.
Please return all correspondence con-	cerning this matter to the following:
Charles G Aur	20 Z
Charles G Ayre Name of Person	
	ZUIO NOV 29 PM I SEGRETVARY OF ST PALLAHASSEEL FLO
CGAyres LLC	. SSE 29 F
Firm/Company	
2004 B: 4	
2221 Pico Lan	e 💮 👼
Address	
M 15 510	
Mount Dora, FL 3: City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
Chy/State and Zip Code	; ·
chuckayres@yahou E-mail address; (to be used for future annua	O.COM al report notification)
For further information concerning th	nis matter, please call:
Charles G Ayres	at (at (386)956-7790
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRES	•
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the fo	ollowing amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

INHS18 (5/08)

* '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:	CGAYRES LLC	
2. (a) Principal office address of limited liability company	y: 2221 Pico Lane	
(Note: MUST BE STREET ADDRESS)	Mount Dora, FL 32757	
(b) Mailing address of limited liability company:	2221 Pico Lane 资务 C	
(Note: MAY BE POST OFFICE BOX)	Mount Dora, FL 32757 TO R	
01/26/2009	L09000007918 S	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on a	the records of the Florida Dept. of State:	
Registered Agent:	United States Corporation Agents, Inc.	
Registered Office Address:	13302 Winding Oaks Blvd.	
	A-100 Tampa, FL 33612 US	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :		
NEW Registered Agent:	Julie Ann Shaw	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	7411 Vienna lane	
	Port Richey ,FL43668	
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 member or authorized representative of a member		
Charles G. Ayres		
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 provision of all statutes relative to the provision of and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to sper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.	

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