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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

T. CLINE

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EXAMINE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: The Skew Company 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:		
Richard L. Skew, Eg. Name of Person		
The Law offices of Richard L. Skeen		
Firm/Company 72		
Wirm/Company Notice of the second second of the second of		
LINGISC FL 3335/ City/State and Zip Code Suite 357 Address FUNDISC FL 3335/ City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Richard Skeen at (954) 748-2969 x 202 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 amount:		
\$25 Filing Fee \$\times \text{S55 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. liability company submits the following statement in ordagent, or both, in the State of Florida.	.508, Florida Statutes, the undersigned limited der to change its registered office or registered
1. Name of the limited liability company: The	Skeen Company, LLC
2. (a) Principal office address of limited liability compar	
(Note: MUST BE STREET ADDRESS)	4700 HIatus Road, Suit 357 SUNRISE, FL 33351
(b) Mailing address of limited liability company:	C/O The law offices of Ridiard L. Skew
(Note: MAY BE POST OFFICE BOX)	4700 Hintus Road Suite 357 Sun Rise, FL 33351
1/30/2009	L09000010456
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	· · · · · · · · · · · · · · · · · · ·
Registered Agent:	Richard L. Skeen
Registered Office Address:	PONTE UPORT TREET, FL32082
(b) Enter name of NEW Registered Agent and/or NE	EW Registered Office address:
<u>NEW</u> Registered Agent:	Richard L. Skeen
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	The Law offices of Ruburd L. Skeen 4700 Heatys Road, Satte 357 Sur Rise ,FL 33351
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be identiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company. By: According to the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the members of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the members of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the limited liability company or as other confirmed that the change of the li	e laws of the State of Florida, it is hereby Florida street address of the registered office ntical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote erwise provided in the articles of organization ny.
Richard Skeen	<u> </u>
Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 808, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability company.	agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in a present as provided for in a present as provided for in a provid

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

Signature of Registered Agent