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PICK-UP	MAIT	MAIL			
(Business Entity Name)					
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Certified Copies Certificates of Status;					
Special Instructions to Filing Officer:					
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Office Use Only



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SECRETARY OF STATE
TABLAHASSEE, FLORIDA

T. CLINE

DEC - 8 2009

EXAMINER

## **COVER LETTER**

_	ntion Section of Corporations				
SUBJECT: WEISBERG ENTERPRISES LLC  Name of Limited Liability Company					
	Name of	Limited	Liability	y Company	
Dear Sir or Mad	dam:				
The enclosed R	egistered Agent/Registered	Office Cl	hange a	nd fee(s) are subm	nitted for filing.
Please return al	l correspondence concerning	g this mai	tter to th	ne following:	
	LILLIAN H. WEISBERG				
	Name of Person				
WE	ISBERG ENTERPRISES	LLC			
	Firm/Company				7. 2
					1009 DEC -7 PM 1: 38 SEGNETARY OF STATE ALLAHASSEE, FLORID
108	17 S. JOG ROAD, SUITE	222			4月日
	Address .				ASS.
					A A
ВС	OYNTON BEACH, FL 334	37			
	City/State and Zip Code				
					10 A
E-mail address	s: (to be used for future annual report	notification	)		
For further info	rmation concerning this mat	ter, pleas	se call:		
LILLIA	AN H. WEISBERG	at (	561	)375	5-9090
7	Name of Person		Ar	rea Code & Daytime Tel	lephone Number
STREET	Γ/COURIER ADDRESS:		MAII	LING ADDRESS:	
	ion Section			tration Section	
Division	of Corporations			ion of Corporations	
Clifton B				3ox 6327	
	ecutive Center Circle see, Florida 32301		Tallar	nassee, Florida 3231	14
	d is a check for the followi	ng amou	ınt:		
<b>√</b> \$25 F	Filing Fee	[	\$55	Filing Fee & Cert	ified 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: WEI	SBERG ENTERPRISES LLC					
2. (a) Principal office address of limited liability company	/:					
(Note: MUST BE STREET ADDRESS)						
(b) Mailing address of limited liability company:	***************************************					
(Note: MAY BE POST OFFICE BOX)						
MARCH 6, 2009	L09000022503					
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:	CORPORATION SERVICE COMPANY					
Registered Office Address:	1201 HAYS STREET ₹					
(b) Enter name of NEW Registered Agent and/or NEV	W Registered Office address:					
NEW Registered Agent:	HENRY LAFFER, ESQUIRE 38					
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	6651 W. WOOLBRIGHT ROAD SUITE 126					
	BOYNTON BEACH ,FL 33437					
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						
LILLIAN H. WEISBERG 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 providing accept the obligations of my portugated to the providing that the limited liability company 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.					
Signature of Registered Agent						
Bivision of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00						

INHS18 (05/08)