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	•				
(Re	questor's Name)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
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<b>4</b> 1	• •	
•		COVER LETTER
TO	Registration Section	
1	Division of Corporations	
SU	JECT: TRANSITION AC	DOITIONS, CLC Limited Liability Company)
•	(Name of	'Limited Liability Company)
		• <i>•</i> •
Dea	· Sir or Madam:	
The	enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.
Plea	se return all correspondence concerning th	nis matter to the following:
•		
;	TEEE PARKER	
 :	(Name of Person)	
7	TANSITION ADDITIONS (Firm/Company)	<u>5, LCC</u>
:		· · · · *
ŀ	20, Box 510247 (Address)	<b>y</b> er 4
:	(Address)	
m	(City/State and ZipCode)	32551
	(City/State and Zip Code)	
		,
For	further information concerning this matter	;, please call:
	Toth PANKIN	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	(Name of Person)	at ( <u>32)</u> <u>302-1048</u> (Area Code & Daytime Telephone Number)
:	STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
i	Division of Corporations	Division of Corporations
	Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
: ; ; ; ; ;	Tallahassee, Florida 32301	· · · · · ·
:	Enclosed is a check for the following	; amõunt:
	S25 Filing Fee	\$55 Filing Fee & Certified Copy
		$\mathcal{O}$
INH	518 (5/08)	

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY • ٠

. . .

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:	TION ADDITIONS, 26C
<ol> <li>(a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)</li> </ol>	Y: 211 ASK AVE MICBOUNNE BCK., FL. 32951
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	P.O. BOX SIOLY7 MILBOURNE BCL., FL. 32951
<u>3- しい- い行</u> 3. Date of filing/registration in Florida	<u>L0900027386</u> 4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	CURPORATION SERVICE COMPANY
Registered Office Address:	1201 HAYS STRAPT TAUAHOSSAR, FL. 32301
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
<b><u>NEW</u></b> Registered Agent:	JEFF PARKER
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	211 ASK AVE MELGOURNE BCK., FL. 32951 ,FL
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of limited liability company.	et address of the registered office and the business case of a Florida limited liability company, it is
(Agenature of a member or authorized representative of a member)	—
(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 pram familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified.	agree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby d in writing of this change.
Suprature of Registered Agent)	
Division of Corporations, P.O. Box FILING FEE	k 6327, Tallahassee, FL 32314
INHS18 (05/08)	FS F

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