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J. SAULSBERRY EXAMINER

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COVER LETTER

TO: Registration Section Division of Corporations	
	al Limited Liability Company of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registere	d Office Change and fee(s) are submitted for filing.
Please return all correspondence concerni	ing this matter to the following:
Joseph A. Dymkowsk Name of Person	<u>.i</u>
Imodal Limited Liability Con Firm/Company	npany
6801 Lake Worth Road - Su Address	
Greenacres, FL 33467 City/State and Zip Code	SECRETARY OF AUCAHASSEE, I
JD@imodal.com E-mail address: (to be used for future annual repo	atter, please call:
For further information concerning this m	atter, please call:
Joseph A. Dymkowski Name of Person	at (561) 653-1230 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 follow	ving amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR DOTH 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.

Name of the limited liability company:	Imodal Limited Liability Company
2. (a) Principal office address of limited liability con	mpany: 6801 Lake Worth Road - Suite 336
(Note: MUST BE STREET ADDRESS)	Greenacres, FL 33467
(b) Mailing address of limited liability company:	6801 Lake Worth Road - Suite 336
(Note: MAY BE POST OFFICE BOX)	Greenacres, FL 33467
April 07, 2009	L09000033746
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	n on the records of the Florida Dept. of State:
Registered Agent:	Joseph A. Dymkowski
Registered Office Address:	224 Datura Street - Suite 214 West Palm Beach, FL 33401
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Joseph A. Dymkowski 6801 Lake Worth Road - Suite 336
	Greenacres ,FL 33467
If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the chan of the members of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company with a provisions of all statutes relative to the and I am familiar with and accept the obligations of all comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of all company of the comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of all company of the complex of the confirm that the limited liability company of Registered Agent Chapter of Registered Agent Ch	the Florida street address of the registered office identical. Or, in the case of a Florida limited age(s) was/were authorized by an affirmative vote otherwise provided in the articles of organization apany.

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