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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(Only Otate/Ziph Holle #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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K.SALY EXAMINER JUN 20 2012

COVER LETTER

TO: Registration Section Division of Corporations	
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SUBJECT: 4903 Li	nsey Court LLC
Name of Limite	d 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 n	natter to the following:
Joan Y McCabe	
Name of Person	
4903 Linsey Court LLC	
Firm/Company	
25 Shore Acre Drive	
Address	
Old Greenwich, CT 06870	
City/State and Zip Code	
jymccabe@optonline.net E-mail address: (to be used for future annual report notificate	on)
For further information concerning this matter, ple	ease call:
Joan Y McCabe at (203) 561-0970
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following am	ount:
\$25 Filing Fee	\$55 Filing Fee & Certified 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:	4903 Linsey Court LLC	
2. (a) Principal office address of limited liability company	y: 25 Shore Acre Drive	
(Note: MUST BE STREET ADDRESS)	Old Greenwich, CT 06870	
(b) Mailing address of limited liability company:	25 Shore Acre Drive	
(Note: MAY BE POST OFFICE BOX)	Old Greenwich, CT 06870	
04/30/2009	ل المجادة الم	
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:	Corporate Creations Network	
Registered Office Address:	11380 Prosperity Farms Road #221E Palm Beach Gardens, FL 33410	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:	W Registered Office address: Joan Y McCabe	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	4903 Linsey Court Sarasota ,FL 34243	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member And Malel Printed or typed name of signee	laws of the State of Florida, it is hereby florida street address of the registered office tical. Or, in the case of a Florida limited	

Signature of Registered Agent

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