

LD9000042238

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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2011 SEP 14 AM 10:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

SEP 15 2011

EXAMINER



2804 Gateway Oaks Drive #200 Sacramento, CA 95833

Phone (800)533-7272 Fax (800)603-5868

REFERENCE # MUST BE ON INVOICE TO BE PAID

PARACORP

NUMBER PAGES:

Date: September 02, 2011

AE: Faith Mburu

TO: Registration Section Division of Corporations

REFERENCE: 622041

CLIFTON BUILDING

TALLAHASSEE, FL 32301

FAX:

PLEASE PERFORM THE FOLLOWING:

CHRISTINE II, LLC

Change of Registered Agent

IN FL

SPECIAL INSTRUCTIONS: PLEASE FILE ON A ROUTINE AND RETURN ONE PLAIN COPY

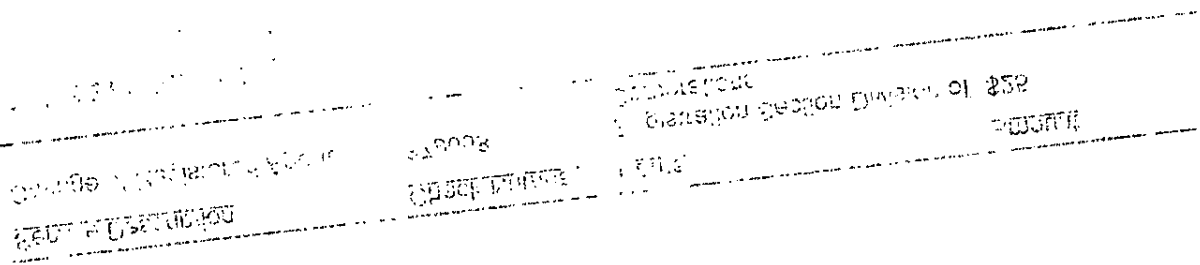
<u>Service Description</u>	<u>Check Number</u>	<u>Name</u>	<u>Amount</u>
Change of Registered Agent	379058	Registration Section Division of Corporations	\$25

PLEASE RETURN: Regular Mail

PLEASE CALL (800)533-7272 ATTN: Faith Mburu TO CONFIRM FILING RESULTS

RETURN TO: PARASEC - 2804 GATEWAY OAKS DRIVE #200 SACRAMENTO, CA 95833

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET (800)
533-7272



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CHRISTINE II, 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:

Faith Mburu
Name of Person

Paracorp Incorporated
Firm/Company

2804 Gateway Okas Dr#200
Address

Sacramento, Ca 95833
City/State and Zip Code

paracorp@parasec.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NINH HO, Assistant Secretary at (800) 533-7272
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

☐ \$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: CHRISTINE II, LLC

2. (a) Principal office address of limited liability company: _____

(Note: **MUST BE STREET ADDRESS**)

25241 Tasman Road
Laguna Hills, CA 92653

(b) Mailing address of limited liability company: _____

(Note: **MAY BE POST OFFICE BOX**)

25241 Tasman Road
Laguna Hills, CA 92653

May 1, 2009

3. Date of filing/registration in Florida

L09000042238

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

ROBERT THATCHER

Registered Office Address:

228 176th Terrace Drive
Redington Shores, FL 33708

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

PARACORP INCORPORATED

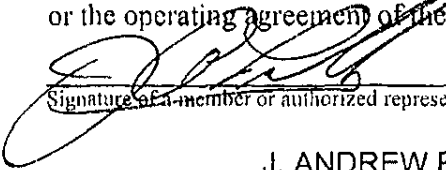
NEW Registered Office Address:

236 East 6th Avenue

(MUST BE FLORIDA STREET ADDRESS)

Tallahassee, FL 32303


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

J. ANDREW FULLER

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


Signature of Registered Agent

NINA HO, ASST. SECRETARY

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00