L09000042613

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								





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SECRETARILY WHILL THE

B. BOSTICK
JUN 1 5 2011
EXAMINER

COVER LETTER

	TO:	-	ation Sec n of Corp								
	SUBJECT: Dune View, 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:										
Hai	\}	Ma	tthe	ew G	erster	ber	<u>-g</u>				
	Dune View UC Firm/Company										
	<u> 75</u>				-		cabin #1		SEUK TALLAI	11	
	Sa	nta	Rose City/S	a. Beo	ch,	Flor	Ja 32459		WSSEL F		7
	E-	mail addres	s: (to be use	d for future ann	ual report notifi	ication)			STATE	ăi II: 49	O
	For further information concerning this matter, please call:										
	Ma	atth	ew (berg a	t (<u> </u>	10) 426-4/ Area Code & Daytime Telep	68 ohone Nu	ımber		
		Registra Division Clifton I 2661 Ex	tion Section of Corpo Building	rations enter Circle	ESS:		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
		Enclose	ed is a ch	eck for the	following a	amoun	t:				
	ſ	S25 I	Filing Fed	3		Γ.	\$55 Filing Fee & Certif	ied Co	nv		

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:	View LLC
2. (a) Principal office address of limited liability company	: 7588 County Hwy 30A
(Note: MUST BE STREET ADDRESS)	Santa Rusa Beach, Florida
(b) Mailing address of limited liability company:	7588 County Hwy 30A
(Note: MAY BE POST OFFICE BOX)	Santa Rosa Beach, Florida
5/1/2009	109000042613
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	
Registered Agent:	Bryan Gerstenberg 905 Garden Gate Cir
Registered Office Address:	_Pensacola, F/ 32504
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent:</u> <u>NEW Registered Office Address:</u> (MUST BE FLORIDA STREET ADDRESS)	Henry Matthew Garstenberg 7588 County Hwy 30 A Santa Rosa Beach, Florida
If the limited liability company is not organized under the legistered that after the change or changes are made, the F and the business office of the registered agent will be ident liability 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	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization
R. (+ 1	SS - Care
Printed or yped name of signee	
I hereby accept the appointment as registered agent and a comply with the provisions of all statules relative to the proving and I am familiar with and accept the obligations of my porture of the configuration of the process of the configuration of the company	gree to act in this capacity of further agree to
Signature of Registered Agent	

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