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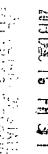
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Special Instructions to Filing Officer:			
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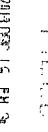
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COVER LETTER

TO: Registration Section Division of Corporations

_{suвлест:} Maymak Development, 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:

Robert Gambell

Name of Person

Maymak Development, LLC

Firm/Company

5011 Dixie Hwy NE, #412

Address

Palm Bay, FL 32905

City/State and Zip Code

rjg343@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Gambell

.772 .538-

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 , $\mbox{\tt BOTH}$ FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.50 liability company submits the following statement in order agent, or both, in the State of Florida.	08, Florida Statutes, the r to change its registere	e undersigned limited ed office or registered		
1. Name of the limited liability company:Makmay Developm	ent, LLC			
2. (a) Principal office address of limited liability company: 5011 Dixie Highway NE, #412				
(Note: MUST BE STREET ADDRESS)	Palm Bay, FL 32905			
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	5011 Dixie Highway NE, #412 Palm Bay, FL 32905			
May 1, 2009	L09000042870			
	4. Document number			
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida	Dept. of State:		
Registered Agent:	Robert Gambell			
Registered Office Address:	540 Cross Creek Circle	2 3		
	Sebastian, FL 32958	77. 66 77. 65		
		All the state of t		
(b) Enter name of NEW Registered Agent and/or NEW	V Registered Office add	dress:		
		3		
NEW Registered Agent:				
NEW Registered Office Address:	5011 Dixie Highway NE, #412			
(MUST BE FLORIDA STREET ADDRESS)	Palm Bay	FL 32905		
If the limited liability company is not organized under the l confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	orida street address of thical. Or, in the case of a	ne registered office Florida limited		
Robert Gambell 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 pround and I am familiar with and accept the obligations of my pochapter 608, F.S. Or of this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capaci oper and complete perfor sition as registered agen rely reflect a change in t y has been notified in wr	ity. I further agree to mance of my duties, t as provided for in he registered office iting of this change.		
Signature of Registered Agent				
Division of Corporations, P.O. Box 63 FILING FEE: \$2		314		