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PICK-UP WAIT MAIL				
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S. HAWKES

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EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ	JECT:G	ALAXY 1 HOLDINGS LLC		
	Nam	of Limited Liability Company		
Dear	Sir or Madam:			
The e	nclosed Registered Agent/Registe	red Office Change and fee(s) are si	ubmitted for filing.	
Please	e return all correspondence conce	ning this matter to the following:		
	BETH G. LINDIE, E.	Q.		
	Name of Ferson			
	Esler & Lindie, P.A Firm/Company	<u>, </u>		
400 SE 6th Street				
	Address			
	Fort Loudordolo FL 2	204		
	Fort Lauderdale, FL 3 City/State and Zip Code			
E	blindie@lawyers.co	n port notification)		
For fi	orther information concerning this	matter, please call:		
	Beth G. Lindie	at (954)	764-5400	
	Name of Person	Area Code & Daytim	e Telephone Number	
	STREET/COURIER ADDRESS	MAILING ADDRE	SS:	
		Registration Section		
	Division of Corporations Clifton Building Division of Corporations P.O. Box 6327		ions	
	2661 Executive Center Circle	Tallahassee, Florida	32314	
	Tallahassee, Florida 32301	• • • • • • • • • • • • • • • • • • • •		
	Enclosed is a check for the fol	owing amount:		
	\$25 Filing Fee	\$55 Filing Fee & 0	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.

Name of the limited liability company:	GALAXY 1 HOLDINGS LLC			
2. (a) Principal office address of limited liability compa	any: 6535 NOVA DRIVE			
(Note: MUST BE STREET ADDRESS)	SUITE 100 DAVIE, FL 33317			
(b) Mailing address of limited liability company:	4611 S. UNIVERSITY DR			
(Note: MAY BE POST OFFICE BOX)	SUITE 454 FORT LAUDERDALE FL 33328			
6/29/09	L09000062626			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:			
Registered Agent:	BETH G. LINDIE, ESQ.			
Registered Office Address:	315 S.E. 7TH STREET			
	SUITE 300 FORT LAUDERDALE FL 33301 US			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Agent:</u> <u>BETH G. LINDIE, ESQ.</u>				
NEW Registered Office Address:	400 SE 6th STREET			
(MUST BE FLORIDA STREET ADDRESS)	FORT LAUDERDALE ,FL 33301			
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 number or authorized representative of a member				
Printed or typed name of signee				
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.			

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