

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H090002546383)))



 Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GUNSTER, YOAKLEY, ETAL. (WEST PAL

Account Number: 076117000420

Phone : (561)650-0728

Fax Number

: (561)655-5677

\*\*Enter the email address for this business entity to be used for futher annual report mailings. Enter only one email address please:\*

Email Address:

## REGISTERED AGENT CHANGE ATHOS MANAGEMENT LLC

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\$43.75

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## H090002546383

COVER LETTER	
TO: Registration Section Division of Corporations	
	anagement LLC 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 m	natter to the following:
Lisa A. Schneider, Esq. Name of Person	
GUNSTER, YOAKLEY & STEWART, P.	Α
777 South Flagler Drive, Suite 500 Eas	<u></u>
West Palm Reach El 22401	
West Palm Beach, FL 33401 City/State and Zip Code	······································
mcramer-scharlatt@gunster.com E-mail address: (to be used for future annual report notification	<del>on)</del>
For further information concerning this matter, ple	ase call:
Mary E. Cramer-Scharlatt, C.P., FRP at (	561 ) 650-0728  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 amo	ount:
<b>∑</b> \$25 Filing Fee	\$55 Filing Fee & Certified Copy

## H090002546383

H0900

## 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: Athos Management LLC 2. (a) Principal office address of limited liability company: 11621 Kew Gardens Avenue (Note: MUST BE STREET ADDRESS) Palm Beach Gardens, FL 33410 (b) Mailing address of limited liability company: 11621 Kew Gardens Avenue (Note: MAY BE POST OFFICE BOX) Suite 109 Palm Beach Gardens, FL 33410 July 22, 2009 L09000070374 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: GY Corporate Services, Inc. 777 South Flagler Drive Registered Office Address: Suite 500 East West Palm Beach. (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: **NEW** Registered Agent: Kathryn K. Theofilos **NEW** Registered Office Address: 1621 Kew Gardens Avenue (MUST BE FLORIDA STREET ADDRESS) Suite 109 Palm Beach Gardens 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.

Lisa A. Schneider, Esq., Authorized Representative Printed or typed name of signee

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, withis document is being filed to merely reflect a change in the registered affice address, I have by continu that the limited liability company has been notified in writing of this charge.

Kathryn K. Theofilos

Signature of a member or authorized representative of a member

vision/of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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