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SUGRETARY OF STATE

T. CLINE

AUG 2 1 2012

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Down town Regarting Name of Limite	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 n	natter to the following:
M, chuel Fort  Name of Person	SEGRETARY OF STATE TABLAHASSEE, FLORID
Downton Reports LCC	
200 5. Anlws Are # 604  Address  Ft Landedole FL 3330	
E-mail address: (to be used for future annual report notificate	νω ωμ tion)
For further information concerning this matter, ple  Michael Fort at (  Name of Person  STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  . Tallahassee, Florida 32301	Area Code & Daytime Telephone Number  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following am \$25 Filing Fee	nount:  \$55 Filing Fee & Certified Copy
J \$23 I ming I ce	L \$55 I ming I do de Continue 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.

agent, or both, in the state of Florida.	0
1. Name of the limited liability company: Downtu	in Reports LLC
2. (a) Principal office address of limited liability company:	200 S. Andres An
(Note: MUST BE STREET ADDRESS)	# 604 Ft 1-22 PC 33501
(b) Mailing address of limited liability company:	(an a) About
(Note: MAY BE POST OFFICE BOX)	
09/23/2009	L09000085363
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Depe of State:
Registered Agent:	Glen Surnamer ( B) B
Registered Office Address:	200 S. Anduratre
	Ft Liverie FC 1770
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:
NEW Registered Agent:	Dountown legal Cornies UC
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	200 S. Andm. An #604
1.110.02.22.2	F-+ Carles ,FL 35701
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identiliability 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  Signature of a member or authorized representative of a member	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote
Michael Frost	_
Printed or typed name of signce  I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office whas been notified in writing of this change.

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

Signature of Registered Agent