## L09000086311

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
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DIVISION OF CORPORATION

N. Culligan NOV 15 2010

## **COVER LETTER**

Division of Corporation	ons		
SUBJECT:	THE STEWART COMPANY, LLC		
	<del></del>	ted Liability Company	
Dear Sir or Madam:			
The enclosed Registered Age	nt/Registered Offic	ee Change and fee(s) are submitted for filing.	
Please return all corresponder	nce concerning this	matter to the following:	
Name of	Person		
	COMPANY, LLC	<u> </u>	
Firm/Cor	npany		
10043 M	arguex Dr		
Addres	iS		
Orlando	FL, 32825		
City/State and	i Zip Code	<del></del>	
ieffsgomez	@gmail.com		
E-mail address: (to be used for it	iture annuai report notific	eatton)	
For further information conce	rning this matter, p	olease call:	
Jeff Gomez	at	( 407 ) 929-0376	
Name of Person		Area Code & Daytime Telephone Number	
STREET/COURIER A	DDDECC.	MAILING ADDRESS:	
Registration Section	IDDKESS:	Registration Section	
Division of Corporation	e e	Division of Corporations	
-	3	P.O. Box 6327	
Clifton Building 2661 Executive Center (	Cimala		
	- '	Tallahassee, Florida 32314	
Tallahassee, Florida 323	·VI		
Enclosed is a check f	or the following a	mount:	
\$25 Filing Fee		<b>✓</b> \$55 Filing Fee & Certified Copy	

**TO:** Registration Section

## 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:	The Stewart Company, LLC	_
2. (a) Principal office address of limited liability compa	oany:	_
(Note: MUST BE STREET ADDRESS)	8802 Windsor Pointe Dr Orlando FL 32829	
(b) Mailing address of limited liability company:		
(Note: MAY BE POST OFFICE BOX)	8802 Windsor Pointe Dr Orlando FL 32829	_
9/8/2009	L09000086311	
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 tates	
Registered Agent:	Jeff Gomez	
Registered Office Address:	10043 Marguex Dr Nordando FL 32825	F11 101
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>		t
NEW Registered Agent:		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8802 Windsor Pointe Dr Orlando ,FL 32829	<u>-</u>
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idliability company, it is hereby confirmed that the change of the members of the limited liability company or as off or the operating agreement of the limited liability company.	lentical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote	,
Signature of a member or authorized representative of a member		
Teff Gomez Printed or typed name of signee	<u></u>	
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 compositions of Registered Agent	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 pany has been notified in writing of this change.	to

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