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(Re	equestor's Name)	
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EXAMINER



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SECRETARY OF STATE OIVISION OF CORPORATION

COVER LETTER

Division of Corporations	
SUBJECT: FERNANDO SMITH	、
	, , ,
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office O	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
	Ç
FERNANDO SMITH	
FERIVANIO Sm 174 Name of Person	
Fernando Smith LLC Firm/Company	
Firm/Company	
DETER CLUB CARTUE COR	c -
2878 B CLUB CORTILE CIRC	
W. (S. 1	1.7
KISSIMMEE, I-L. 3470 City/State and Zip Code	7 6
5huggg/3 e yahoo, com E-mail address: to be used for future annual report notification	
E-mail address: (to be used for future annual report notification	on)
For further information concerning this matter, plea	ase call
1 of further information concerning this matter, proc	ase can.
Name of Person at (Area Code & Daytime Telephone Number
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amo	ount:
✓ \$25 Filing Fee	\$55 Filing Fee & Certified Copy
L_1* · ·····- · · · ·	+->

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.

3 , , , , , , , , , , , , , , , , , , ,	
1. Name of the limited liability company: FERNAN	USO SMITH LLC
2. (a) Principal office address of limited liability compan	y: <u>2878-B CLUB CORTILE</u> CIRE
(Note: MUST BE STREET ADDRESS)	KISSIMMEE, FWRIDA
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	DIVISION JA
10-22-2009	L09000101914 25 955
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:	MERCEDIS CONTLINEDO OF
Registered Office Address:	G328 TILDENS GRUJE BLUD WINDERMERE FL.
	34786
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	FERNIANDO SMITH
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2878-B CLUB CORTILE CIRCLE
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe of the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	laws of the State of Florida, it is hereby
FERNANDO Smith 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 prand I am familiar with and accept the obligations of my portugate of the confirmation of the procument is being filed to me address. I hereby confirm the soft the liability companions of Registered Agent	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in crely reflect a change in the registered office by has been notified in writing of this change.

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