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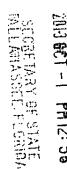
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 126 HARBOR ROAD LLC

Name of Limited 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 matter to the following:

RICHARD A. MURDOCH

Name of Person

MURDOCH, WEIRES & NEUMAN, PLLC

Firm/Company

14 SE 4 ST, SUITE 36

Address

BOCA RATON, FL 33432

City/State and Zip Code

rmurdoch@mwnlegal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICHARD A. MURDOCH at 661 347-870

Name of Person

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 amount:

\$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

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SECRETARY OF STATE
SECRETARY ASSET. FLORI

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: 126 HARBOR ROAL	DILC	
2 (a) Police lead of Comment and a comment of the lead	700 LAKÉ DEDVÉ	
2. (a) Principal office address of limited liability compa		
(Note: MUST BE STREET ADDRESS)	BOCA RATON, FL 33432	
(b) Mailing address of limited liability company:	700 LAKE DRIVE	
(Note: MAY BE POST OFFICE BOX)	BOCA RATON, FL 33432	
10/27/2009_	L09000103467	
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	
Registered Agent:	BDB AGENT CO.	
Provintaged Office Address	F255 TOWN CENTED DOAD	3 - 2
Registered Office Address:	5355 TOWN CENTER ROAD SUITE 900	
	BOCA RATON, FL 33486	The state of the s
		·TIT IN green.
(I) C. CNIDINI B. C. I. A. I. A. I. A.	DIVID 1. LOCK	등 전 경
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office ad	ldresspと でm の
<u>NEW</u> Registered Agent:	RICHARD A. MURDOCH, ESQ.	
NEW Registered Office Address:	14 SE 4TH STREET	
(MUST BE FLORIDA STREET ADDRESS)	SUITE 36	
•	BOCA RATON	,FL 33432
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 ide liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company	Florida street address of the chical. Or, in the case of a (s) was/were authorized by wise provided in the article	he registered office a Florida limited y an affirmative vote of
-		
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 comply that the limited liability comply	d agree to act in this capac proper and complete perfo position as registered age merely reflect a change in any has been notified in wi	rity. I further agree to ormance of my duties, nt as provided for in the registered office riting of this change.
Signature of Registered Agent		

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