## L09000113630

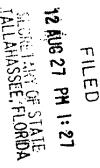
(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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COVE	R LETTER	
TO: Registration Section Division of Corporations		
SUBJECT: Meltham LLC  Name of Limited Liability Company		
Name of Limited	Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
Marie B Code, Esq		
Name of Person		
Marie B. Code Esq. P.L.		
Firm/Company	<u> </u>	
1308 SW 27th Terrace		
Address		
Cons Corol El 22014		
Cape Coral FL 33914  City/State and Zip Code		
City/state and Zip Code		
marie@marieesquire.com		
E-mail address: (to be used for future annual report notificati	on)	
For further information concerning this matter, ple	ease call:	
To raine moments concerning in matter, pre		
Maria B Ondo For	000 0000	
Marie B Code, Esq at (at (	239 829-0063 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 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified 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.

Name of the limited liability company:	Meltham LLC	
2. (a) Principal office address of limited liability company	8961 Conference Dr. Ste 2	
(Note: MUST BE STREET ADDRESS)	Fort Myers, FL 33919	
(b) Mailing address of limited liability company:	8961 Conference Dr. Ste 2	
(Note: MAY BE POST OFFICE BOX)	Fort Myers, FL 33919	
11/30/2009	L09000113630	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:	
Registered Agent:	Code, Marie B Esq	
Registered Office Address:	1202 SE 8th Place Ste B Cape Coral FL 33990	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent:</u> <u>NEW Registered Office Address:</u>	1308 SW 27th Terrace	
(MUST BE FLORIDA STREET ADDRESS)	Cape Coral ,FL 33914	
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be ident liability 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 of authorized representative of a member  Marie B Code, Esq	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization	
Printed or typed name of signee	A section this case with the first terms to the section of the sec	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provided and I am familiar with and accept the obligations of my post-chapter 608, F.S. Or, if this document is being filed to me 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 has been notified in writing of this change.	

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