## L0900119300

(F	Requestor's Name)
( <i>/</i>	Address)
( <i>f</i>	Address
į (	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(1)	Business Entity Name)
(	Document Number)
Certified Copies	Certificates of Status
Special Instructions to F	iling Officer:
	J DBH # 3
	DECIR Y segg

Office Use Only



000420630570



## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. 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.

I. No	me of the limited liability company: ODORSTA	AR TECHNOLOGY, LL	C		
2. (a)		(b)			
<b>2</b> . (u <sub>1</sub> , .	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	ny:	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BON)		
	4041 SW 47 AVENUE	4041 5	SW 47 AVENUE	7 AVENUE	
	FORT LAUDERDALE, FL 33314	FORT	FORT LAUDERDALE, FL 33314		
	12/15/2009	L09000	119300		
3.	Date of filing/registration in Florida	4.	Document number	r	
5. <b>-</b> (a)					
3(a)	Registered Agent and Registered Office shown on the reco	ords of the Florida Dept. of S	State:		
	CAPITOL CORPORATE SERVICES, INC.				
	Registered Office Address (MUST BE FLORIDA STI	REET ADDRESS)	<u> </u>		
	515 E. PARK AVE., 2ND FL	· <del>-</del>			
	TALLAHASSEE	32301			
	TALEATIAGGEE	FL	<del></del>		
				• .	
(b)	Enter name of NEW Registered Agent and/or NEW Reg	istered Office address:			
	The same of the sa	Merco (y)Mer address.		. 11	
	Corporation Service Company			<del>.</del>	
	NEW Registered Office Address:			رے	
	1201 Hays Street				
	Tallahassee	. FL 32301			
change agent w was/we	mited liability company is not organized under to changes are made, the Florida street address will be identical. Or, in the case of a Florida limitere authorized by an affirmative vote of the memicles of organization or the operating agreement of	of the registered office ted liability company, i bers of the limited liabi	and the business offic it is hereby confirmed ility company or as ot	re of the registered that the change(s)	
	/s/ Jill Cilmi	•	thorized Person		
	ure of a member or authorized representative of a member		Printed or typed name	e of signee	
provisio the obli to mere	ov accept the appointment as registered agent an ins of all statutes relative to the proper and com- gations of my position as registered agent as pri ly reflect a change in the registered office addre In writing of this change.	pleie performance of m ovided for in Chapter 6 ess. I hereby confirm th	apacity. I further agr. by duties, and I am far. 505, F.S. Or, if this do at the limited liability RBY, ASST. VICE P	niliar with and accept ocument is being filed company has been	
	Drace C-Kubly	— OKACE E KI	NOT, MOST, VICE P	NESIDEN I	
Signatur	e of Registered Agent				

ور دیک ت