L09000122096

RAUL LOPEZ (Requestor's Name)			
620 SW 51ST AVE			
(Address)			
(Address)			
TAKGATE FC 33068 (City/State/Zip/Phone #)			
(Only/State/Zipir Holle #)			
PICK-UP WAIT WAIL			
(Business Entity Name)			
L69860 122096			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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Office Use Only



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2010 DEC 21 AM II: 06

J. SAULSBERRY EXAMINER DEC 2 2 2010

COVER LETTER

Division of Cor	porations			
SUBJECT:	RAUL LOPEZ 1	LUC poration		
DOCUMENT NUMBI	er: 1090001220	90	_	
The enclosed Statement	of Change of Registered Office/A	gent and fee are submitted for	filing.	
Please return all corresp	ondence concerning this matter to	the following:		
	RAUL LOPE Z Name of Conta	of Parson		
	Name of Contac	ct i eison		
	RAVL LODEZ Firm/Com	LLC	_	
	Firm/Com _j	pany	₹. 2	
	620 SW 515T A	WE		***
	Addres	S	- ASE	-
	MARCHATE, FO	1 33048	2010 DEC 21 AM II: 06 SENTETARY OF STATE ALLAHASSEE, FLORIDA	the transfer
	City/State and 2	Zip Code	AM II: 06 F STATE F LORIDA	1,
E-m	nail address: (to be used for futu	re annual report notification	,	
2	4441455. (45 55 4554 151 1444	or annual report necessions.	-)	
For further information	concerning this matter, please call	:	,	
LAUL Name of	SPEZ Contact Person	at (954) 263 9 Area Code & Daytime Tele	ephone Number	
	eck made payable to the Departme	-	.,	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporati Clifton Building 2661 Executive Cent		

Tallahassee, FL 32301

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:	EZ, LLC			
2. (a) Principal office address of limited liability company:	020 SW 515TAVE			
(Note: MUST BE STREET ADDRESS)	MARGATE, FL 33068			
(b) Mailing address of limited liability company:	RAUL LOPEZ, LCC			
(Note: MAY BE POST OFFICE BOX)	620 SW 51 STAVE MARGATE, FL 33068			
12/24/09 3. Date of filing/registration in Florida	1. Document number			
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
Registered Agent:	COLDURATION SERVICE CO			
Registered Office Address:	1201 HAYS ST THUAHASSE , FZ 32301			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	Registered Office address:			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	420 SN 57 ST AVE MARGATE ,FL 33068			
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identically company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwork or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member LAUL LOPE Printed or typed name of signee I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the provision of all statutes relative to the provision of an amount of the provision of the obligations of my post Chapter 608, F.S. Or, if this document is being filled to mere address thereby confirm that the limited liability company	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of organization			

6