(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
-					
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Office Use Only



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B. BOSTICK JAN 1 8 2012 **EXAMINER**

COVER LETTER

TO:	Registration Section Division of Corporations			
SUB	SUBJECT: Florida Signature Homes, LLC Name of Limited Liability Company			
Dear	Sir or Madam:			
The e	enclosed Registered Agent/Regis	tered Office (Change and fee(s)	are submitted for filing.
Pleas	e return all correspondence conc	erning this m	atter to the followi	ng:
			٢	
	Anna Lythgoe			
	Name of Person			
	Florida Signature Hom Firm/Company	es, LLC		
	4025 Cattlemen Rd Address	#124	· · · · · · · · · · · · · · · · · · ·	ĨĀ.
	Sarasota, FL 342 City/State and Zip Code	33		12 JAN 17 F
<u>E</u>	Anna@floridasignatureh	omes.com	on)	DISOL STATE
For fi	urther information concerning th	is matter, plea	ase call:	DA CO
<u>, </u>	·····	at (_	941)	244-5232
	Name of Person STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	S:	MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Tallahassee, Flor	tion porations
	Enclosed is a check for the fo	ollowing amo	ount:	
	\$25 Filing Fee		\$55 Filing Fee	e & 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.

1. Name of the limited liability company:	Florida Signature Homes, LLC				
2. (a) Principal office address of limited liability con	npany: 1751 Mound St. #207				
(Note: MUST BE STREET ADDRESS)	Sarasota, FL 34236				
(b) Mailing address of limited liability company:	4025 Cattlemen Rd #124				
(Note: MAY BE POST OFFICE BOX)	Sarasota, FL 34233				
2/18/2010	L10000018530				
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:					
Decistant Office Address.					
Registered Office Address:	 				
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> : (<u>NEW Registered Office Address:</u>)	3765 Eagle Hammock Dr				
(MUST BE FLORIDA STREET ADDRESS)					
	Sarasota ,FL 34240				
If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the char of the members of the limited liability company or as or the operating agreement of the limited liability com	the Florida street address of the registered office identical. Or, in the case of a Florida limited age(s) was/were authorized by an affirmative vote otherwise provided in the articles of organization apany.				
I le	LLR J				
Signature of a member or authorized representative of a member					
Anna Lythaue					
Printed or typed name of signee	The state of the s				
I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of the Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability con					

Signature of Registered Agent