## L100000027268

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D. BRUCE
MAY 09 2011
EXAMINER

## COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Village Industries, LC  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:
Phonda Stapleton Name of Person
Village Industries, LLC Firm/Company  P.O. BA 570204  Address
P.O. BA 570204  Address
Address
Orlando, FL 32857-0204  City/State and Zip Code
Samaritanyi (lage @ Amail. Com E-mail address: (to be used for future annual deport notification)
For further information concerning this matter, please call:
Phonda Stapleton at (407) 282-2252  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 & 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:	Industries, LLC
2. (a) Principal office address of limited liability company	y: 3851 E. Coloniae Dr.
(Note: MUST BE STREET ADDRESS)	Orlando, FL 32807
(b) Mailing address of limited liability company:	P.O. Bux 570204
(Note: MAY BE POST OFFICE BOX)	Orlando, FL 32857-0204
03/10/2010	L10000027268
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:	Rhonda Stapleton
Registered Office Address:	1219 22 nd Street= Orlando, FL = 32855
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	Same Et &
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2014 Forest Circle Orlando FL 32803
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability 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 or authorized representative of a member	lorida 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	<u></u>
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the providing of an familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compan	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office whas been notified in writing of this change.
Signature of Registered Agent	

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