

## 10000055850

(Requestor's Name)		
(Address)		
(Address)		
(Audiess)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Danish Marilan)		
(Document Number)		
Certified Copies Certificates of Status		

Special Instructions to Filing Officer:

L. SELLERS

FEB - 2 2011

**EXAMINER** 

Office Use Only



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## **COVER LETTER**

Division of Corporations		
	Development, LLC	
Name of Limite	d 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:	
	<b>3</b>	
	•	
Fred D. Boozer, Jr.		
Name of Person	<u> </u>	
Lady Prop Development 11.0		
Lady Bug Development, LLC Firm/Company	<del></del>	
1 mb company		
4885 North Wickham Road Suite 106		
Address		
Melbourne, FL 32940	<u> </u>	
City/State and Zip Code		
fredhoozerir@hoozernroperties.com		
fredboozerjr@boozerproperties.com E-mail address: (to be used for future annual report notificati	on)	
For firsther in Comment of the control of the contr	11	
For further information concerning this matter, ple	ase can:	
Fred Boozer, Jr. at (_	321 ) 724-9999	
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.

1. Name of the limited liability company:	ady Bud Development, LLC
2. (a) Principal office address of limited liability compar	ny: 4885 North Wickham Road
(Note: MUST BE STREET ADDRESS)	Suite 106 Melbourne, FL 32940
(b) Mailing address of limited liability company:	Same as above
(Note: MAY BE POST OFFICE BOX)	
1/25/2011	L1 00000 55850
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of State:
Registered Agent:	Componential Service Company
Registered Office Address:	TOURHASSES, FL
	32301
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :  NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	EW Registered Office address:  Freo Boszer Jn.  4885 North Widthen Suite low
	MELBURE
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idealiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement 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  Printed or typed name of signee  I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pand I hereby confirm that the limited liability company.	Florida street address of the registered office ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization ny.
Signature of Registered Agent	

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