L10000075119

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FYARMER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT:	CANALSIDE SPECIALTIES, LLC Name of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/H	Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence	concerning this matter to the following:
STEPHEN J. FE	
CANALSIDE SPEC	
838 MOONLI Address	T LANE
CASSELBERRY City/State and Zip	
SJFERGUSON@C	CFL.RR.COM annual report notification)
For further information concerni	ng this matter, please call:
STEPHEN FERGUSO Name of Person	DN at (407) 388-3550 Area Code & Daytime Telephone Number
STREET/COURIER ADI Registration Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, Florida 32301	PRESS: MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327
Enclosed is a check for t	the following amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

SIA

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:C	CANALSIDE SPECIALTIES, LLC		
2. (a) Principal office address of limited liability comp	pany: 838 MOONLIT LANE		
(Note: MUST BE STREET ADDRESS)	CASSELBERRY, FL 32707		
(b) Mailing address of limited liability company:	838 MOONLIT LANE		
(Note: MAY BE POST OFFICE BOX)	CASSELBERRY, FL 32707		
JULY 16, 2010	L10000075119		
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:	UNITED STATES CORPORATION AGE		
Registered Office Address:	13302 WINDING OAKS BLVD. SUITE A-100 TAMPA, FL 33612		
(b) Enter name of <u>NEW Registered Agent</u> and/or			
NEW Registered Agent:	STEPHEN J FERGUSON		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	838 MOONLIT LANE		
(MOST DE L'EGRIDA STREET ADDRESS)	CASSELBERRY. ,FL32707 5		
If the limited liability company is not organized under confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company or the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liabili	he Florida street address of the registered office dentical. Or, in the case of a Florida limited ge(s) was/were authorized by an affirmative vote		
Printed or typed name of signee	and annual to the control of the con		
I hereby accept the appointment as registered agent a	na agree to act in this capacity. I further agree to		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has 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