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(Re	equestor's Name)	
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

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EXAMINER



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08/26/11--01026--015 **25.00

COVER LETTER

Gator Toes, LLC	
f Limited Liability Company	
Office Change and fee(s) are submitted for filing.	
ng this matter to the following:	
, may a company :	
nm	
om rt notification)	
atter, please call:	
at (352) 317-2876	
Area Code & Daytime Telephone Number	
MAN DIC ADDRECO	
MAILING ADDRESS: Registration Section	
Division of Corporations	
P.O. Box 6327	
Tallahassee, Florida 32314	
·	
ving amount:	
\$55 Filing Fee & Certified Copy	

TO: Registration Section

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.

Name of the limited liability company:	Gator Toes, LLC		
2. (a) Principal office address of limited liability company	: 6908 SW 93rd Ave		
(Note: MUST BE STREET ADDRESS)	Gainesville, FL 32608		
(b) Mailing address of limited liability company:	6908 SW 93rd Ave		
(Note: MAY BE POST OFFICE BOX)	Gainesville, FL 32608		
8/19/2010	L10000087185		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:		
Registered Agent:	United States Corporation Agents, Inc.		
Registered Office Address:	13302 Winding Oaks Blvd Suite A Tampa, FL 33612		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV NEW Registered Agent</u> : <u>NEW Registered Office Address:</u>	Andrew Cohen 6908 SW 93rd Ave		
(MUST BE FLORIDA STREET ADDRESS)	With the		
	Gainesville ,FL 32608		
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member			
Andrew Cohen Printed or typed name of signee	-		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the providing and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the impled inbility company	gree to act in this capacity. I further agree to sper and complete performance of my duties, sition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.		

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

Signature of Registered Agent