L10000102865

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

Office Use Only



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10/22/12--01037--022 **25.00



B. BOSTICK
OCT 2 3 2012
EXAMINER

COVER-LETTER

TO: Registration Section

INHS18 (5/08)

Division of (Corporations	
SUBJECT:		SSY BROTHERS, LLC
	Name of	Limited Liability Company
Dear Sir or Madam:		
The enclosed Regist	ered Agent/Registered (Office Change and fee(s) are submitted for filing.
Please return all core	respondence concerning	g this matter to the following:
N	SHAT AZAM, ESQ. Name of Person	
A	ZAMISNYTKIN, PA	
	Firm/Company	
555 WIND	ERLEY PLACE, SUIT	TE 300 72 007 27
	Address	
	AITLAND, FL 32751	2 PH 12: 3
C	ity/State and Zip Code	
NAZAM E-mail address: (to b	@AZAM-SNYTKIN.C e used for future annual report r	
For further informat	ion concerning this matt	ter, please call:
NICHAT	A7ANA FOO	407 574 0000
	AZAM, ESQ.	at (407) 571-6926 Area Code & Daytime Telephone Number
Registration S		MAILING ADDRESS: Registration Section
Division of Co Clifton Buildi		Division of Corporations P.O. Box 6327
2661 Executiv	e Center Circle	Tallahassee, Florida 32314
Tallahassee, F	lorida 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.

· ·			
Name of the limited liability company:	DIOSSY BROTHERS, LLC		
2. (a) Principal office address of limited liability compar	ny: 3740 20TH ST., SUITE A		
(Note: MUST BE STREET ADDRESS)	VERO BEACH FL 32960 US 3740 20TH ST., SUITE A		
(b) Mailing address of limited liability company:	3740 20TH ST., SUITE A		
(Note: MAY BE POST OFFICE BOX)	3740 20TH ST., SUITE A		
10/01/2010	L10000102865		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept. of State:		
Registered Agent:	LAW OFFICE OF MARIA CALDARONE		
Registered Office Address:	3740 20TH ST., SUITE AVERO BEACH FL 32960:US		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	AZAMISNYTKIN, PAG &		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	555 WINDERLEY PLACE, SUITE 300		
	MAITLAND, FL 32751 ,FL 32751		
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 or member of authorized representative of a member			
NISHAT AZAM, ESQ. Printed or typed name of signee	_		
I hereby accept the appointment as registered agent and comply with the provisions of all statules relative to the plant I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address, thereby confirm that the limited liability compar	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office ny has been notified in writing of this change.		

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

Registered Agent