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SECRETARY OF STATE ON VISION OF CONTORATION

N. Ourtgan JUN _ 1 2811

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJECT: Russell Property C							
	Ŋ	lame of Limited	1 Liabil	ity Con	mpany		
Dear S	ir or Madam:						
The en	closed Registered Agent/Reg	gistered Office	Change	and fee			
Please	return all correspondence co	ncerning this m	atter to	the foll	Street address		
	Antoinette W. R Name of Person	ussell		-	Clarefic		
	Russell Property G Firm/Company	roup LLC			ford reg.		
	P.O. Box 14	84					
	Address				age		
	St. Petersburg, Fl	_ 33731					
	City/State and Zip Co			_			
	toni@russellpropertyman mail address: (to be used for future and rther information concerning						
	Antainalla M/ Dunnall		707		4242627		
	Antoinette W Russell Name of Person	at (_	727)	4212627 de & Daytime Telephone Number		
	Name of Person			Alca Cou	de & Dayume Telephone Municer		
	STREET/COURIER ADDR	ESS:	MA	ILING	ADDRESS:		
Registration Section Division of Corporations				Registration Section Division of Corporations			
	Clifton Building			Box 63			
	2661 Executive Center Circle Tallahassee, Florida 32301		Tal	lahassee	e, Florida 32314		
	Enclosed is a check for the	following amo	ount:				

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.	Na	me of the limited liability company:	Russell Property Group LLC			
2.	(a)	Principal office address of limited liability compa	any: 125 5th Street S			
		(Note: MUST BE STREET ADDRESS)	Suite 201 St. Petersburg, FL 33701			
	(b)	Mailing address of limited liability company:	P.O. Box 1484			
		(Note: MAY BE POST OFFICE BOX)	St. Petersburg, FL 33731			
		05/26/2011 te of filing/registration in Florida Registered Agent and Registered Office shown of	4. Document number on the records of the Florida Dept. of State:			
		Registered Agent:	Antoinette W Russell			
		Registered Office Address:	689 Central Avenue St. Petersburg, FL 33701			
	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :					
		NEW Registered Agent:	Antoinette W Russell			
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	125 5th Street S Suite 201 St. Petersburg ,FL33701			
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						
Pri	inted	Antoinette W. Russell or typed name of signee	<u> </u>			
	K,	by accept the appointment as registered agent and with the provisions of all statutes relative to the purpose that with and accept the obligations of my for 608, F.S. Or, if this document is being filed to a s, I hereby confirm that the limited liability compared to the first of Registered Agent	l agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in nerely reflect a change in the registered office any has been notified in writing of this change.			

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

INHS18 (05/08)