#L/000/28/45

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K. SALY EXAMINER JAN 12 2011

COVER LETTER

Registration Section

Division of Corporations		
SUBJECT: LEMON DROP HOLDINGS LLC Name of Limited Liability Company		
Name of Limited Liability Company		
Dear Sir or Madam:		
Dom Sir of Madain.		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Trease retain an correspondence concerning and matter to the ronowing.		
JOHN ELLSWERTH		
Name of Person		
Firm/Company		
830-13 AIA NORTH #280 Address		
Address		
PONTE VEDRA BENCH, FL 32082		
City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
E-man address. (to be used for future annual report normeation)		
For further information concerning this matter, please call:		
JOHN ELLSWORTH at (904) 309-2552		
Name of Person Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: MAILING ADDRESS:		
Registration Section Registration Section		
DOHIV ELLSWORTH at (904) 309-2552 Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: MAILING ADDRESS:		

Tallahassee, Florida 32314

\$55 Filing Fee & Certified Copy

INHS18 (5/08)

2661 Executive Center Circle

Enclosed is a check for the following amount:

Tallahassee, Florida 32301

\$25 Filing Fee

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.3 liability company submits the following statement in order agent, or both, in the State of Florida.	er to change its registered office or registered
1. Name of the limited liability company: LENION	DROP HOLDINGS LLC
2. (a) Principal office address of limited liability compan	y: 830-13 AIA NORTH
(Note: MUST BE STREET ADDRESS)	#280
	POINTE LEDRA BEACH FL 32082
(b) Mailing address of limited liability company:	830-13 AIA MORTH
(Note: MAY BE POST OFFICE BOX)	PORTE VEDRA BEACH, FL 3208
DECEMBER 13, 2010	L10000128145
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:	JOHN ELISWORTH
Registered Office Address:	67 FORTE VEDRA COLONY CINCLE POINTE VEDRA BEACH, FLAZORZ
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	830-13 AIA NORTH # 280 PUNTE VEDRA BEACH FL32682
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be ider liability 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. Signature of a member or authorized representative of a member	Florida street address of the registered office ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote
20日ル EULS W ではTH Printed or typed name of signee	<u> </u>
	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