## 110000128230

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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D. BRUCE
JUL 0 8 2011
EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporation						
SUBJECT:	Lurin ( Name of I			ment, LLC Company		
Dear Sir or Madam:						
The enclosed Registered A	Agent/Registered (	Office Ch	ange and	d fee(s) are su	bmitted for filin	ıg.
Please return all correspon	dence concerning	this mat	ter to the	following:		
	e Noguera					
Nam	e of Person					
Lurin Global Investments, LLC Firm/Company					ر آ	
5703 Red Bug Lake Rd #246			LCAHASS			
Winter Springs, FL 32708  City/State and Zip Code					Y OF STATE SEE, FLORIDA	11 JUL-7 AM脚44
E-mail address: (to be used to	or future annual report r	notification)				
For further information co	ncerning this matt	ter, pleas	e call:			
José Nogu Name of Perso		_ at ('	407) Area		385-0177 Telephone Number	
STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, Florida	tions ter Circle		Registr Divisio P.O. Bo	ING ADDRES ation Section n of Corporation ox 6327 assee, Florida 3	ons	
Enclosed is a che	k for the followin	ng amou	nt:			
\$25 Filing Fee			\$55 F	iling Fee & C	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.

i.	Name of the limited liability company:	Lurin Global Investments, LLC			
	(a) Principal office address of limited liability com	5700 D 1 D 1 1 D 1 1040			
	(Note: MUST BE STREET ADDRESS)	Winter Springs, FL 32708			
	(b) Mailing address of limited liability company:	5703 Red Bug Lake Rd #246			
	(Note: MAY BE POST OFFICE BOX)	Winter Springs, FL 32708			
	12/15/2010	L10000128230			
3.	Date of filing/registration in Florida	4. Document number			
5.	(a) Registered Agent and Registered Office show	n on the records of the Florida Dept. of State:			
	Registered Agent:	UNITED STATES CORPORATION AGE			
	Registered Office Address:	13302 WINDING OAKS BLVD. SUITE A			
		TAMPA FL 33612 US			
	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent: <u>NEW Registered Office Address:</u>	Jose Noguera 5703 Red Bug Lake Rd			
	MUST BE FLORIDA STREET ADDRESS)	#246 Winter Springs ,FL32708			
con and lial of or Sign	the limited liability company is not organized under nfirmed that after the change or changes are made, if the business office of the registered agent will be ability company, it is hereby confirmed that the char the members of the limited liability company or as the operating agreement of the limited liability company or as the operating agreement of the limited liability company or as the operating agreement of the limited liability company or as the operating agreement of the limited liability company or as the operating agreement of the limited liability company or as the operating agreement of the limited liability company with the provisions of all statutes relative to the operations of all statutes relative to the operations of all statutes relative to the operations.	the laws of the State of Florida, it is hereby the Florida street address of the registered office identical. Or, in the case of a Florida limited nge(s) was/were authorized by an affirmative vote otherwise provided in the articles of organization in an affirmative vote of the state of the			
an Ch ad	d I am familiar with and accept the obligations of napter 608, F.S. Or if this document is being filed in dress, I hereby confirm that the limited liability con	and agree to act in this capacity. I further agree to he proper and complete performance of my duties, my position as registered agent as provided for in to merely reflect a change in the registered office mpany has been notified in writing of this change.			

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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