## 111000002949

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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FEB 17 2011	
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## **COVER LETTER**

Division of Corporations	
Division of Corporations	
SUBJECT:	EE STREET LEESBURG, LLC
	ame of Limited Liability Company
5 6 1	
Dear Sir or Madam:	
The enclosed Registered Agent/Regi	stered Office Change and fee(s) are submitted for filing.
Please return all correspondence con	cerning this matter to the following:
Karen J Robert Name of Person	son
Name of Person	
Firm/Company	
23404 County Ro	ad 33
Address	au 55
Groveland, FL 34	1736
City/State and Zip Cod	e e
robfarm33@yahoo E-mail address: (to be used for future annu	D.COM al report notification)
For further information concerning the	his matter, please call:
Name of Person	at ( 352 ) 408-8130  Area Code & Daytime Telephone Number
Name of Person	Area code & Payante Pelephone Admited
STREET/COURIER ADDRE	
Registration Section Registration Section Division of Corporations Division of Corporations	
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	•
Enclosed is a check for the following amount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy
A 1 4-2 8 . 44	

SUPPICES TUIL

## 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. LEE STREET LEESBURG, LLC 1. Name of the limited liability company: \_\_\_\_\_ 23404 County Road 33 2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Groveland, Florida 34736. 23404 County Road 33 (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Groveland, Florida 34736 January 7, 2011 L11000002949 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: Karen J Robertson 23404 CR 33 Registered Office Address: Groveland, FL 34736 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: **NEW** Registered Agent: Incorp Sevices, Inc. **NEW** Registered Office Address: 17888 67th Court North (MUST BE FLORIDA STREET ADDRESS) .FL33470 Loxahatchee 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 regresentative of a member Karen J Robertson, Trustee Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company 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