L11000012505

(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 Fili		

Office Use Only



600207295906

05/09/11--01017--031 **35.00

and was



J. SAULSBERRY EXAMINER

JUN 3 0 2011

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Florida Furniture Repair, LLC Name of Corporation
DOCUMENT NUMBER:
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
Florida Furniture Repair LLC Firm/Company
2255 Saw Palmetro Lone 17110. Address
Orlando P1 32828 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kgn/Gipe at (321) 689-7726 Name of Contact Person - Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassec, FL 32314

Street Address:

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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. Name of the limited liability company:デクトリ	a Funiture Repair LLC
2. (a) Principal office address of limited liability compan	•
(Note: MUST BE STREET ADDRESS)	2255 San Pelnetto Lore #110 Orlando, r. 1 32828
(b) Mailing address of limited liability company:	florida Fornina Repair
(Note: MAY BE POST OFFICE BOX)	2255 San Palmetro Love # 110 Orlando, P.1 32828
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:	legal Zoon
Registered Office Address:	7053 Holl und Blud sate 16
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	
NEW Registered Agent:	La 16ipe
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1255 San Palmetro Line # 11
If the limited liability company is not organized under the confirmed that after the change or changes are made, the Fand the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company or the operating agreement of the limited liability company or the operation of a member of	lorida street address of the registered office tical. Or, in the case of a Floridadimical was/were authorized by an afficuative vote rwise provided in the articles affigurezation.
19981	erety reflect a change in the registered office y has been notified in writing of this change.
Signature of Registered Agon Division of Corporations, P.O. Box 63	27, Tallahassee, FL 32314

FILING FEE: \$25.00