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COVER LETTER

TO: Registration Section Division of Corporations				
FL FAB LLC SUBJECT:				
	Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Cl	hange and fee(s) are submitted for filing.			
Please return all correspondence concerning this man	tter to the following:			
BRAINE-BONNAIRE, FRANCOIS				
Name of Person				
Firm/Company				
120 19TH ST NAPT 408				
Address				
BIRMINGHAM, AL 35203				
City/State and Zip Code				
FRANCOISBB @ 6-MAIL (1) E-mail address: (to be used for future annual re	<u>om</u>			
	•			
For further information concerning this matter, pleas	e call:			
Sensible Property Management	813 831-7368			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	tive Center Circle Tallahassee, Florida 32314			
Enclosed is a check for the following amou	int:			
S25 Filing Fee	□ \$55 Filing Fee & Certified Copy			
INHS18 (2/14)				

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	ame of the limited liability company: FL FAB LLC		. <u>-</u>	
2. (a)	120 19TH ST N APT 408		(b) 120 19	9TH ST N APT 408
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- '		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	BIRMINGHAM, AL 35203	 -	BIRMI	NGHAM, AL 35203
	02/01/2011		L11000	013375
3.	Date of filing/registration in Florida	4.		Document number
S. (a)	Stress Free Property Management Inc			
J. (a)	Registered Agent and Registered Office shown on the records of a	he Flori	da Dept. of Si	Tate:
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE	20	
	Tampa	33605	5	
(b)	SENSIBLE PROPERTY MANAGEMENT INC		-	APR 2
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:	- 25 CE
	4501 E Columbus Dr			AM 8:
	NEW Registered Office Address:			TATIONS
	Tampa .FL	33605		
he cha gent v vas/w he arti	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law ture of a member or authorized representative of a member	s of th the reg bility of the lis	e State of F istered offi company, it mited liabil	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
I herei proviși he obl o mere notified	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I h I in writing of this change.	ee to ac perform for in ereby c	et in this ca nance of m Chapter of confirm tha	spacity. I further agree to comply with the y duties, and I am familiar with and accept 95, F.S. Or, if this document is being filed at the limited liability company has been