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(Requestor's Name)		
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PICK-UP WAIT MAIL		
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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: 9490 Corkscrew Name of Limited	Palms 3, LLC d Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Dawn Davis-Laubhelmer Name of Person Rocuart Law Frm Firm/Company		
Firm/Company		
9480 Corksurew Palms Chicle suite 3		
Estro FC 38928 City/State and Zip Code		
davis_laubheiner@ Yahoo.con E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Dawn Daws Laubhelmer at (739) 947-6500 Name of Person Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & 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.

agent, or both, in the state of Florida.	Δ
1. Name of the limited liability company: 9480	Corkscrew Palms 3, LLC
2. (a) Principal office address of limited liability compar	y: 9480 Corkscrew Palms Circle
(Note: MUST BE STREET ADDRESS)	21508 Langholm Run
	FSIERO : FL 33928
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	9480 Corkscan Palms Circle Swife 3
14/21/2011	Estero, FL 33928
3. Date of filing/registration in Florida	4. Document number \$ 11 0000 49 195
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Corporation Service Compan
Registered Office Address:	1201 Hays street Tallahassee, FL 32301
	•
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	PAUL ROCLEANT
NEW Registered Office Address:	Rocuart Law Firm
(MÜST BE FLORIDA STREET ADDRESS)	9490 Corkscrew Palms Circle, Suite 3 Estero FL 33729
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	laws of the State of Florida, it is hereby Florida street address of the registered office itical. Or, in the case of a Florida imited s) was/were authorized by an attendative voter wise provided in the articles of organization y.
Printed or typed name of signee	Öm ∰ A
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my package of the configuration of the configur	igree to act in this capacity. I further agree to oper and complete performance of my duties, oxition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.
Signature of Registered Agent	
the state of the s	

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