L11000054924

(Requestor's Name)					
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· (City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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J. SAULSBERRY EXAMINER

AUG 16 2012

COVER LETTER

TO:	Registration Section Division of Corporation	s			,
CUD	ECT.	LEBO INVEST	MENT GROU	ID I I C	
SUB	JECT:		Liability Compa		
				··· <i>y</i>	
Dear	Sir or Madam:				
The e	enclosed Registered Agent.	Registered Office (Change and fee(s)	are submitted f	or filing.
Pleas	e return all correspondence	e concerning this ma	atter to the follow	ving:	
	LARRY L P				
	Name of Pe	rson			
LEBO INVESTMENT					
	Firm/Compa	iny			A. N
					ZOIZ AUG 13 SECRETARY ALLAHASSEE
8975 CROWN BF		RIDGE WAY			
	Address				S & S
FORT MYERS, FI					
	City/State and Z	ip Code			AH S:
					\$ 3
	PITTVETTE@H0 -mail address: (to be used for future)	OTMAIL.COM			
1	z-man address. (to be used for futua	e annual report notificatio	on)		
For f	urther information concern	ing this matter, plea	ase call:		
	LARRY L PITTMA	.N at (910-7780	
	Name of Person		Area Code &	Daytime Telephone	Number
	STREET/COURIER AD	DRESS:	MAILING AD	DRESS:	
	Registration Section		Registration Se		
Division of Corporations			Division of Co		
	Clifton Building		P.O. Box 6327		
	2661 Executive Center Cir		Tallahassee, Fl	orida 32314	
	Tallahassee, Florida 3230	l			
	Enclosed is a check for	the following amo	ount:		
	\$25 Filing Fee		\$55 Filing Fo	ee & Certified (Сору

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:	BO INVESTMENT GROUP LLC				
2. (a) Principal office address of limited liability comp	ompany: 8975 CROWN BRIDGE WAY				
(Note: MUST BE STREET ADDRESS)	EORT MYERS, FL 33908				
(b) Mailing address of limited liability company:	8975 CROWN BRIDGE WAY				
(Note: MAY BE POST OFFICE BOX)	FORT MYERS, FL 33908				
MAY 10, 2011	L11000054924				
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:	KURSTEN R JARRETT				
Registered Office Address:	18 TEAK ROAD OCALA, FL 34472				
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>I</u> <u>NEW</u> Registered Agent:	LARRY L PITTMAN				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8975 CROWN BRIDGE WAY FORT MYERS ,FL 33908				
If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change of the members of the limited liability company or as or or the operating agreement of the limited liability company or the operating agreement of the limited liability company or as or or the operating agreement of the limited liability company or as or or the operating agreement of the limited liability company. Signature of a member authorized representative of a member LARRY L PITTMAN Printed or typed name of signee I hereby accept the appointment as registered agent are comply with the provisions of all statutes relative to the and I am families. Or, if this document is being filed to address I hereby confirm that the limited liability company.	ne Florida street address of the registered office dentical. Or, in the case of a Florida limited se(s) was/were authorized by an affirmative vote therwise provided in the articles of organization pany.				
Signature of Registered Agent					

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

INHS18 (05/08)