Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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: C T CORPORATION SYSTEM Account Name

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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LLC REGISTERED AGENT CHANGE BRILAND LANE, LLC

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Corporate Filing Menu

Help

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5/13/2013

	FILE
	13 MAY 13 AM 10: 2
•	SEPTITE 'S AMION A
STATEMENT OF CHANGE OF REGISTERED OFF BOTH FOR LIMITED LIABILITY COMPANY	ICE OR REGISTERED AGENT OR
Pursuant to the provisions of sections 608.416 or 608. Itability company submits the following statement in ord agent, or both, in the State of Florida.	508 Florida Statutes, the understanted limited A
1. Name of the limited liability company: Britand Lans, LLC	
2. (a) Principal office address of limited liability company	
(Note: MUST BE STREET ADDRESS)	Prewer 611310 Rosemany Beach, FL 52481
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
July 18, 2011	L11D0D092340
3. Date of filling/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	Richard S. Molteose
Registered Office Address:	3846B Emercial Gozsi Parkway
-	Suite 1201 Coatio, FL 525(1
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> <u>NEW Registered Agent</u> :	Registered Office address:
	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1200 South Pins Intend Road
	Pfaniation ,FI 33324
the limited liability company is not organized under the latenfirmed that after the change or changes are made, the Florid the business office of the registered agent will be identicability company, it is beroby confirmed that the change(s) we members of the limited liability company or as otherwise experating agreement of the limited liability company.	rida street address of the registered office al. Or, in the case of a Florida limited vas/were authorized by an affirmative vote of
nature of a member or sulhorized representative of a member	
an A. Corr, Sr. nted or typed name of signes	
nereby accept the appointment as registered agent and agr apply with the provisions of all statutes relative to the prop of I am familiar with and accept the obligations of my posit apter 608, F.S. Or. Whis document is being filed to mere dryss, I hereby confirm that the limited liability company h	es to act in this capacity. I further agree to er and complete performance of my dulies, ion as registered agent as provided for in y reflect a change in the registered office as been notified in writing of this change.
nature of Registered Ages Nathan S. Giffin Asst. Secretary	
Division of Corporations, P.O. Box 6327	
FILING FEE: \$25.	00

INHS18 (05/08)