11000083322

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SECRETABY OF STATE

COVER LETTER

Division of Corporations		
SUBJECT: MC	DDERN GYPSIES, LLC	
Name of Limited Liability Company		
Name of Entitled Elability Company		
Dear Sir or Madam:		
•		
The enclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.	
Discourse all commenced and a second of second of the seco		
Please return all correspondence concerning this matter to the following:		
Fredric C. Jacobs, Esq		
Name of Person		
Bach & Jacobs, P.A.		
Firm/Company	· · · · · · · · · · · · · · · · · · ·	
240 Dinasanla Assausa Cuit	. 700	
240 Pineapple Avenue, Suit	<u>e 700 </u>	
Addiess		
i		
Sarasota, FL 34236	·	
City/State and Zip Code		
lesli@sarasotaelderlaw.co	om	
13-mail address: (to be used for future annual repor	rt notification)	
For further information concerning this ma	atter, please call:	
.	, ,	
F. 11: 0 1 1 F		
Fredric C. Jacobs, Esq. Name of Person	at (941) 906-1231	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

TO: Registration Section

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.

Name of the limited liability company:	MODERN GYPSIES, LLC
2. (a) Principal office address of limited liability comp	pany: 240 Pineapple Avenue, #700
(Note: MUST BE STREET ADDRESS)	Sarasota, FL 34236
(b) Mailing address of limited liability company:	240 Pineapple Avenue, #700
(Note: MAY BE POST OFFICE BOX)	Sarasota, FL 34236
July 19, 2011	L11000083322
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:	Benjamin I. Karp
Registered Office Address:	240 Pineapple Avenue, #700 Sarasota, FL 34236
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>I</u> <u>NEW Registered Agent</u> : <u>NEW Registered Office Address:</u>	Babette B. Bach, Esq.
(MÜST BE FLORIDA STREET ADDRESS)	.FL
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 is liability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company or as of or the operating agreement of the limited liability company or as of the operating agreement of the limited liability company. Signature of a member or authorized representative of a member 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 familiar with and accept the obligations of my Chapter 608, F.S. or, if this document is being filed to address, Thereby confirm that the limited liability company.	the laws of the State of Florida, it is hereby the 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	