## L110000085796

(Re	equestor's Name)			
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
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C. LEWIS

AUG - 7 2012

EXAMINER

## COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:	Breliah LLC				
	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Ag	ent/Registered Office	Change and fee(	s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:					
	Code, Esq f Person				
Marie B. C	ode Esq. P.L.				
1308 SW Addr	27th Terrace				
	ral FL 33914 nd Zip Code				
marie@mai E-mail address: (to be used for					
For further information concerning this matter, please call:					
Marie B Code,	Esq at (	239 )	829-0063		
STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, Florida 32	ns · Circle	Area Code & Daytime Telephone Number  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.

1.	Name of the limited liability company:	Breliah LLC	
2.	(a) Principal office address of limited liability company	8961 Conference Dr. Ste 2	
	(Note: MUST BE STREET ADDRESS)	Fort Myers, FL 33919	
	(b) Mailing address of limited liability company:	8961 Conference Dr. Ste 2	
	(Note: MAY BE POST OFFICE BOX)	Fort Myers, FL 33919	
	07/26/2011	L11000085796	
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:	Code, Marie B Esq	
	Registered Office Address:	1202 SE 8th Place Ste B Cape Coral FL 33990	
	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :  NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1308 SW 27th Terrace	
		Cape Coral ,FL 33914	
and lia of or	the limited liability company is not organized under the lanfirmed that after the change or changes are made, the Fld the business office of the registered agent will be ident bility company, it is hereby confirmed that the change(s) the members of the limited liability company or as other the operating agreement of the limited liability company	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization	
Pri	Marie B Code, Esq	_	
	hereby accept the appointment as registered agent and a mply with the provisions of all statutes relative to the pro d'I am familiar with and accept the obligations of my po- napter 608, F.S. Or, if this document is being filed to me dress, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to sper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.	

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

Signature of Registered Agent