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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: EZY SERVICES LLC Name of Limited	Liability Company	_
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Peter E. Baker		
Ezy Services LLC		
34 Chadwick Drive	33 (c) (c) (n)	· ·
Voorhees, NJ 08043	AHASSE SE	2 - 3 - 3 - C
City/State and Zip Code		
bfsnj@comcast.net E-mail address: (to be used for future annual report notification		±
For further information concerning this matter, plea		
Peter E. Baker	356 768-8898	
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	

□ \$55 Filing Fee & Certified Copy

■ \$25 Filing Fee

Enclosed is a check for the following amount:

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: EZY SERVICES LLC		
2. (a) Principal office address of limited liability compar (<i>Note: MUST BE STREET ADDRESS</i>)	y: 34 Chadwick Drive Voorhees, NJ 08043	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	34 Chadwick Drive Voornees, NJ 08043	
August 11, 2011	L11000092753	
3. Date of filing/registration in Florida	4. Document number	- Z0
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Depl	Cof State
Registered Agent:	Business Filings Incorporated	
Registered Office Address:	1203 Governors Square Blvd., Suite 101 Tallahassee, Flonda 32301-2960	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
(b) Enter name of NEW Registered Agent and/or NE		£ .
NEW Registered Agent:	Alfred Franza	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3762 Holly Drive	.FL 33410
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be ider liability company, it is hereby confirmed that the change(the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the regintical. Or, in the case of a Floridal, was/were authorized by an af	istered office da limited firmative vote of
Peter E. Baker Printed or typed name of signee	_	
I hereby accept the appointment as registered agent and comply with the provisions of all statules relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address; I have by confirm that the limited liability comparations.	róper and complete performanc position as registered agent as p	ve of my duties, provided for in
Signature of Registered Ageny		
Division of Corporations, P.O. Box 6 ALERO FILING FEE:		

INHS18 (05/08)