## L11000093382

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2011 SEP - 6 RM 2: 36
SECRETARY OF STATE

C. LEWIS

SEP - 7 2011

EXAMINER

CQVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Future Conce	Pls of DF ce Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered O	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Capol Howa	and_
	$\mathcal{L}(\mathcal{A}_{\mathcal{L}})$
1-4tune ConcePts	of DFW
16900 First Stree C	East #1203
Month Redington Ber City/State and Zip Code	ach, FL (33708)
MCCable Q yahoc  E-mail address: (to be used for future annual report in	otification)
For further information concerning this matte	er, please call:
FAYE Collins	at (214) 243-4592
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
Enclosed is a check for the following	g amount:

\$55 Filing Fee & Certified Copy

\$25 Filing Fee

## 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 liability company submits the following statement in or agent, or both, in the State of Florida.	3.508, Florida Statutes, the undersigned limited der to change its registered office or registered
	ure ConcePtS of DFCe LL
2. (a) Principal office address of limited liability compa	my: 8533 Brushy Oreektrai
(Note: MUST BE STREET ADDRESS)	foxtworth TX 710118
(b) Mailing address of limited liability company:	8533 BRushy Creek-Paul
(Note: MAY BE POST OFFICE BOX)	Atwarta TX 76118
8/15/2011	L11000093282
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:
Registered Agent:	Kobert Pe Della ora
Registered Office Address:	4136 Westwoodsell Ave
	Holiday Pt. 3469.10
(b) Enter name of <b>NEW Registered Agent</b> and/or <b>N</b>	EW Registered Office address: 75
NEW Registered Agent:	Cupol Howard 2 3
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	16900 tirst street East #203
	DORYL Redington Beath, FL 33708
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as ofter or the operating agreement of the limited liability company or the operating agreement of the limited liability company.  Signature of a member of authorized representative of a member  Printed or typed name of signee  I hereby accept the appointment as registered agent and 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, I hereby confirm that the limited liability company.	Florida street address of the registered office entical. Or, in the case of a Florida limited street such or street authorized by an affirmative vote nerwise provided in the articles of organization any.
Signature of Registered Agent	