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COVER LETTER

Division of Corporations	
IBRHSF I. LLC SUBJECT:	
	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	er to the following:
Ian B. Russell	
Name of Person	
IBRHSF I, LLC	
Firm/Company	
16437 Carrara Way, Unit 102	
Address	
Naples, FL 34110	
City/State and Zip Code	
irussellco@comcast.net	
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter, please	call:
Jay F. Cook	612 963-3061
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amour	nt:
■ \$25 Filling 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 605.0114 or 605.0116. 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. N	ame of the limited liability company: IBRHSF I, L	LC					_	
2. (a)			ſb)				
. ,	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)		ν.,	/	Mailing address (Note: MA)			
	16437 Carrara Way, Unit 102			6437 Cai	rrara Way, Uni	t 102		
	Naples, FL 34110			Naples, I	FL 34110			-
	August 19, 2011			L I 100009	6326			
3.	Date of filing/registration in Florida	4.	-		Document n	number	-	
5. (a)								
	Registered Agent and Registered Office shown on the record	s of the Flo	rida	Dept. of St	ate:			
	Law Offices of Jay F. Cook P.L.						202	
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDR	ESS,	!		7.		****
	5150 N. Tamiami Trail, Suite 201						2021、1112	-1
	Naples	. FL 3410:	3		_	•		
					_		. <u>3</u>	
(b)	Enter name of NEW Registered Agent and/or NEW Registo						~; ;	
	Einter name of <u>NEW Registered Agent</u> and/or <u>NEW Registo</u>	ered Office	adt	lress:			ં 3	
	lan B. Russell							
	NEW Registered Office Address:	- · · -			_			
	16437 Carrara Way, Unit 102							
	Naples	E1 34110)					
change agent v was/we the arti	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members of organization or the operating agreement of	laws of the regist I liability is of the l the limite	he S erec cor limi d lis	State of F I office an opany, it ted liabili	lorida, it is he nd the busines is hereby conf ity company o mpany.	s office of firmed that r as other	f the reg t the cha wise pro	istered
-	ture of a member or authorized representative of a member				Printed or type		_	
I herel provisi the obl. to mere notified	by accept the appointment as registered agent and cons of all statutes relative to the proper and compligations of my position as registered agent as providy reflect a change in the registered office address, I'm writing of this change.	agree to c ete perfor ided for it . I hereby	act i mai n Ci coi	n this cap ice of my iapter 6() ifirm that	pacity. I furth duties, and I i 5, F.S. Or, if i t the limited lid	er agree to am familio this docun ability con	o compl ar with a nent is t npany h	y with the and accept being filed as been
Signatur	re of Registered Agent		_					