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(Requestor's Name)		
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	e #)
<u></u>	☐ WAIT	<u>_</u>
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
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B. BOSTICK
SEP 2 1 2011

**EXAMINER** 

## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJECT: METATRONICA FELLOWSHIP, LLC  Name of Limited Liability Company			
Dear	Sir or Madam:		
The e	nclosed Registered Agent/Registered Office	ee Change and fee(s) are submitted for filing.	
Please	e return all correspondence concerning this	matter to the following:	
	JAN M SCHIEBERL  Name of Person		
	METATRONICA FELLOWSHIP, LLC Firm/Company		
	7172 REGIONAL STREET NUM 440 Address	11 SEP 20 PH 12: 38 STATE SELVEL ANASSES: FLORID	
	DUBLIN, CA 94568 City/State and Zip Code	STATE AFLORIDA	
E	JANNIES1017@GMAIL.COM -mail address: (to be used for future annual report notifica	ation)	
For fu	urther information concerning this matter, pl	lease call:	
<del></del>	JAN SCHIEBERL at (	( 925 ) 719-1013  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 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.

Name of the limited liability company: METATRONICA FELLOWSHIP, LLC		
2. (a) Principal office address of limited liability company	y: 11100 SW 93rd Court RD 10-118	
(Note: MUST BE STREET ADDRESS)	OCALA, FLORIDA 34484	
(b) Mailing address of limited liability company:	7172 REGIONAL STREET NUM 440	
(Note: MAY BE POST OFFICE BOX)	DUBLIN, CALIFORNIA 94568	
09/06/11	L11000101429	
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:	RICHARD HENRY ANDREWS, LLC	
Registered Office Address:	11100 SW 93RD COURT RD 10-201 OCALA, FLORIDA 34481	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:	
NEW Registered Agent:	EDDIE LEON ANDREWS, LLC	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	11100 SW COURT RD 10-118	
-	OCALA ,FL 34481	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	laws of the State of Florida, it is hereby lorida 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.	
Signature of a member or authorized representative of a member	AH SE	
JAN SCHIEBERL	_ \( \times \cdot	
Printed or typed name of signee  I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the property with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company.  Signature of Registered Agent	great to get in this canacity. I finisher arrest to	

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