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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

T. CLINE

JUL 10 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
	ELECTRONICS, LLC	
Name of Limited	Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office C	change and fee(s) are submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Lyman S. Bradford IV Name of Person		
Manie of Letzon		
Northweight av. D.A		
Northpoint Law, P.A. Firm/Company		
· · ·		
801 Northpoint Parkway, Suite 17		
Address	FAL	
	2 L - 9 LAHASSE	
West Palm Beach, Florida 33407		
City/State and Zip Code	(SSR 79 -9 F	
	in the second se	
Zakdeily@me.com		
Zakdeily@me.com E-mail address: (to be used for future annual report notification		
View Country in Commentation and approximately and a second	Ş′′′ ∞	
For further information concerning this matter, plea	se call:	
Lyman S. Bradford IV at (561) 275-1700	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building 2661 Executive Center Circle	P.O. Box 6327	
Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following amo	unt:	
\$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:	Palm Beach Electronics, LLC	
2. (a) Principal office address of limited liability comp	any: 11576 Pierson Road	
(Note: MUST BE STREET ADDRESS)	#K9 Wellington, Florida 33414	
(b) Mailing address of limited liability company:	11576 Pierson Road	
(Note: MAY BE POST OFFICE BOX)	#K9 Wellington, Florida 33414	
September 6, 2011	L11000101907	
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:	Satmary, Vincent	
Registered Office Address:	500 Crosswinds Drive	
	#D1 Greenacres, Florida 33413Eco	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>		
NEW Registered Agent:	Deily, Zachary SAZ G	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1250 Belmore Terrace	
	Wellington , 233414	
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 id liability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	e Florida street address of the registered office lentical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote	
Zachary Deily Printed or typed name of signee		
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chepter 608, F.S. Ot., if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.	
Signature of Registered Agent		
Division of Corporations, P.O. Box	6327, Tallahassee, FL 32314	

FILING FEE: \$25.00

INHS18 (05/08)