L11000143057

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SECRETARY OF COMPANY OF SECRETARY OF COMPANY OF SECRETARY OF SECRETARY

C. LEWIS

JAN 8 2013

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Black River Realty LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Allen K Brady

Name of Person

Black River Realty LLC

Firm/Company

5286 Clinton Street

Address

Lowville, NY 13367

City/State and Zip Code

allenkbrady@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Allen Brady

...315

222-4080

Name of Person

Area Code & Daytime Telephone Numbe

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 FQR 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. Na	ame of the limited liability company: Black River Realty LLC	;		
2. (a)	Principal office address of limited liability compan	v. 17949 SE Federal Highway		
()	(Note: MUST BE STREET ADDRESS)	Tequesta, Florida 33469	~2	<u> </u>
		<u> </u>	=======================================	35
(h)	Mailing address of limited liability company:	5286 Clinton Street	JAN	學習
(0)	(Note: MAY BE POST OFFICE BOX)	Lowville, NY 13367	1.	73
				4.5
			P	
12-21-1		L11000143057		
3. Da	te of filing/registration in Florida	4. Document number	်ပ္သ	7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
5. (a	Registered Agent and Registered Office shown on	the records of the Florida Dept	. of State:	
	Registered Agent:	Allen K Brady		
	Registered Office Address:	20283 State Road 7		
	Nog. Store a Street Fluctions.	Boca Raton, 33498		
		•	,	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:		
	NEW Registered Agent:	Same		
	NEW Registered Office Address:			
	(MUST BE FLORIDA STREET ADDRESS)	17949 SE Federal Highway		
		Tequesta	_,FL <u>33469</u>	
confin	limited liability company is not organized under the med that after the change or changes are made, the Fee business office of the registered agent will be identity company, it is hereby confirmed that the change(sembers of the limited liability company or as otherworating agreement of the limited liability company.	lorida street address of the regi	stered office	ce ote of or
Signatu	Te of a member or authorized representative of a member	<u> </u>		
2.6	· ·			
	Wetmore			
	l or typed name of signee	_		
I here comp and I Chap addre	eby accept the appointment as registered agent and a ly with the provisions of all statules relative to the pr am familiar with and accept the obligations of my po ter 608, F.S. Or, if this document is being filed to me ass, I hereby confirm that the limited liability compan	ngree to act in this capacity. I joper and complete performance osition as registered agent as perely reflect a change in the registered in writing of	further agr e of my du rovided for istered off of this chan	ee to ties, in ice ge.
Signati	ure of Registered Agent			

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