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(Req	juestor's Name)		
(Add	lress)		
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(City	/State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
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(Doc	ument Number)		
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K.SALY EXAMINER DEC 1 4 2012

. COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: August16, LLC	
	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.
Please return all correspondence concerning the	nis matter to the following:
Kathleen Shanahan	
Name of Person	
Firm/Company	,, 10 ° 11, 0
2625 W Sunset Drive	
Address	
Tampa FL 33629	
City/State and Zip Code	
kshanahan@uretekfl.con E-mail address: (to be used for future annual report no	
For further information concerning this matter	r, please call:
Jura Zibas	at (917) 744-4116
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:
■ \$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. Na	me of the limited liability company: August16, LLC			
2 (0)	Dringing office address of limited liability compan	v. 616 Lyons Lane		
2. (a,	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	Longboat Key, FL 34228	<i></i>	
	(NOR. MOST BE STREET ADDRESS)			
			要写 多 少	
(b)	Mailing address of limited liability company:	2625 W Sunset Drive		
(Note: MAY BE POST OFFICE BOX)	(Note: MAY BE POST OFFICE BOX)	Tampa, FL 33629		
			.000 m	
			Elight E	
12/29/2	011	L11000145145		
3. Da	ate of filing/registration in Florida	4. Document number	95%	
J. D.	in or imigrogramon in rional			
5. (a) Registered Agent and Registered Office shown on	the records of the Florida De	nt of State:	
J. (a	y Registered Agent and Registered Office shown on	the records of the Fronta De	pt. of Biate.	
	Registered Agent:	Corporation Service Company		
	1.08.51.01.01.1.80	-		
	Registered Office Address:	1201 Hays Street		
	·	Tallahassee FL 32301		
(h	Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office addres	· ·	
ίο	The hame of MEW Registered Agent and/or ME	W Registered Office address	<u>.</u>	
	NEW Registered Agent:	Kathleen Shanahan		
	11277 Tegistored rigoni.			
NEW Registered Office Address:		2625 W Sunset Drive		
	(MUST BE FLORIDA STREET ADDRESS)			
		Tampa	,FL_33629	
confi and the liabil the m	limited liability company is not organized under the rmed that after the change or changes are made, the line 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 otherworsting agreement of the limited liability company.	Florida street address of the re itical. Or, in the case of a Floi s) was/were authorized by an a	gistered office rida limited affirmative vote of	
Signati	fe of a member or authorized representative of a member			
Kathlee	n Shanahan			
	l or typed name of signee			
I her comp and I Chap addre	eby accept the appointment as registered agent and ly with the provisions of all statules relative to the part am familiar with and accept the obligations of my pater 609, F.S. Or if this document is being filed to make the first company of	agree to act in this capacity, roper and complete performan osition as registered agent as erely reflect a change in the r ny has been notified in writing	I further agree to nce of my duties, provided for in egistered office of this change.	

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