## #1/2000011321

(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone	e #)
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K.SALY EXAMINER MAY 1:1 2012

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Property Investors At Name of Limited	Liance Suc 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:	
Coronet Scarbourgh Name of Person  Property Investors Alliance I	hc_	
1026 W. anderson St. Address Orlando Fl 32805	·	
City/State and Zip Code		
Coroneta Nathanie & bells on the E-mail address: No be used for future annual report notification	note that	
For further information concerning this matter, plea	se call:	
Coronet Scarbough at (_	407 423-5231 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. liability company submits the following statement in ordered agent, or both, in the State of Florida.	508, Florida Statutes, the undersigned limited der to change its registered office or registered
1. Name of the limited liability company: Krofetty	Investors Alliance LLC
2. (a) Principal office address of limited liability compar	ny: 1583 E. Wilver Star Rd#242
(Note: MUST BE STREET ADDRESS)	Orlando Il 347/6/
(b) Mailing address of limited liability company:	1583 E Silver Harke #24
(Note: MAY BE POST OFFICE BOX)	Dilando FC 34761
1/24/12	L12000011321
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	n the records of the Florida Dept. of State:
Registered Agent:	Vonda E. Dukes
Registered Office Address:	4505 Bannella St.
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u> <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address: <u>(MUST BE FLORIDA STREET ADDRESS)</u>	EW Registered Office address:  Loronet Scarbough  1926 W. Anderson St.  1016 U. Anderson St.  1016 F. B.
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 idealiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	Florida street address of the registered office ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization by.
Veronica W. Ureene Printed or typed name of signee	<b>一个人</b>
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability compand the compandation of the companda	agree to act in this capacity. Effirther agree to proper and complete performance of my duties, position as registered agent as provided for in perely reflect a change in the registered office ny 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