

L12 0000 11416

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : NRAI CORPORATE SERVICES, INC.
Account Number : I20080000023
Phone : (651) 225-9500
Fax Number : (651) 225-9579

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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LLC REGISTERED AGENT CHANGE
1709 NE LLC

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JAN 15 2013

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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: 1709 NE LLC
2. (a) Principal office address of limited liability company: 2731 Executive Park Drive
 (Note: MUST BE STREET ADDRESS)
Suite #4
Weston, FL 33331
- (b) Mailing address of limited liability company: 144 Julie Drive
 (Note: MAY BE POST OFFICE BOX)
Colchester, VT 05446

1/24/2012

L12000011416

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: Eubanks, Christian
 Registered Office Address: 2731 Executive Park Drive
Suite #4
Weston, FL 33331
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Agent: NRAI Services, Inc.
NEW Registered Office Address: 515 East Park Avenue
 (Note: MUST BE FLORIDA STREET ADDRESS)
Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Jeffrey Marcotte
 Signature of a member or authorized representative of a member

JEFFREY MARCOTTE
 Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: NRAI Services, Inc.

Signature of Registered Agent

Jeffrey Marcotte, RST, Sec.
 Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (05/08)