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SECRETARY OF STATE
TALLAMASSEE FERRING.

COVER LETTER

TO:	Registration Section Division of Corporations					
SUВЛ				PROPERTIES LLC ability Company		
	Name of	Limited	1.10	aomy Company		
Dear S	ir or Madam:					
The er	sclosed Registered Agent/Registered	Office C	har	nge and fee(s) are submitted for filing.		
Please	return all correspondence concerning	g this ma	ittei	r to the following:		
	Don Jones					
	Name of Person					
PEACE OF MIND PROPERTIES LLC						
	Firm/Company					
	1739 Shelburne Ln					
	Address					
Sarasota, FL 34231						
	City/State and Zip Code					
E-	don@pompfla.com	notification	n)			
For fu	rther information concerning this mat	ter, pleas	se c	call:		
	Don Jones	_ at (94			
	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			P.O. Box 6327		
	2661 Executive Center Circle Tallahassee, Florida 32301		·	Tallahassee, Florida 32314		
	Enclosed is a check for the followi	ng amou	unt -	:		
	✓ \$25 Filing Fee			\$55 Filing Fee & Certified Copy		

TO:

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.

Name of the limited liability company: PEAC	E OF MIND PROPERTIES LLC	
2. (a) Principal office address of limited liability company	y:	
(Note: MUST BE STREET ADDRESS)	1739 SHELBURNE LN SARASOTA FL 34231	
(b) Mailing address of limited liability company:	<u> </u>	
(Note: MAY BE POST OFFICE BOX)	1739 SHELBURNE LN SARASOTA FL 34231	
05/24/2012	L12000070238	
3. Date of filing/registration in Florida	4. Document number 577 5	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	CORPORATION SERVICE COMPANY	
Registered Office Address:	1201 HAYS STREET TALLAHASSEE FL 32301 US	
NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Don Jones 1739 SHELBURNE LANE	
(MUSI BE FLORIDA SIREEI ADDRESS)	Sarasota ,FL34231	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s 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 surpoized representative of a member Printed or typed name of signee	_	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the provision of all statutes relative to the property of amount of a with and accept the obligations of my perchapter 408, F.S. Ok, in this document is being filed to me address, whereby confirm that the limited liability company. Signature of Registered Agent	ngree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in crely reflect a change in the registered office y has been notified in writing of this change.	

FILING FEE: \$25.00