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COVER LETTER

TO: Registration Section Division of Corporations							
Stanley Law Center, P.L.							
Name	Name of Limited Liability Company						
Dear Sir or Madam:							
							
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this	s matter to the following:						
Angela Stanley							
Name of Person							
Stanley Law Center, P.L.							
Firm/Company							
115 Granada Court							
Address							
Orlando, FL 32803							
City/State and Zip Code							
astanley@stanleylawcenter.com							
E-mail address: (to be used for future annu	nal report notification)						
For further information concerning this matter, p	please call:						
Angela Stanley	407 705-2722						
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						
Tananassee, Fronta 52501							
Enclosed is a check for the following a	amount:						
☑ \$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 605.0114 or 605.0116, 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. N	lame of the limited liability company: Stanley Law	Cente	er, I	P.L.	
2. (a)			(b)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	115 Granada Court			P.O. Bo	x 2132
	Orlando, FL 32803			Orlando	, FL 32802-2132
	7/3/2012		l	_120000	87240
3.	Date of filing/registration in Florida	4.	-		Document number
5. (a)				
	Registered Agent and Registered Office shown on the records of Angela J. Stanley	the Flor	rida	Dept. of Stat	– e:
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRE	ESS)		-
	118 East Jefferson Street , Suite 20	05			
		3280)1		-
	,11				
(b)	r				16
	Enter name of NEW Registered Agent and/or NEW Registered	1 Office	add	ress:	310).
	Angela J. Stanley (same agent, new addres	:e)			16 OCT 27 AH ID: 23
	NEW Registered Office Address:				F DURPO
	115 Granada Court				9 = [
					MIIO: 23
	Orlando , FI	3280)3		హై ట -
the ch agent was/w	limited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited hivere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	f the re iability of the l	egis / co limi	tered offic mpany, it i ited liabilit	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in
	(NXL	Α	۱ng	ela Stani	ley
Sign	ature of a member of authorized representative of a member				Printed or typed name of signee
provis the ob to men notifie	eby accept the appointment as registered agent and agisions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflectly change in the registered office address, I ed in writing of this change.	ree to a e perfoi ed for i hereby	act rma in C y co	in this cap ince of my hapter 60, nfirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Signat	rure of Registered Agent	D. ~		. mn ** *	FI 20244
	\ \ \ Division of Corporations● P.O. \	Box 63	327	• Tallaha	ssee, FL 32314

FILING FEE: \$25.00