

U12-000155029

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

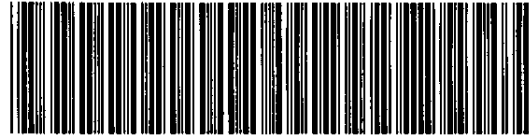
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FEB 11 2014
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SECRETARY
FEB 10 2014

2014 FEB 10 PM 2:24

FILED

GLOBAL ASSET ADVISORS, INC.

Florida Department of State
Registration Section, Div of Corp
PO Box 6327
Tallahassee FL 32314

Enclosed are resident agent changes for the following Florida entities:

EGV-I LLC L12000155029
Villea LLC L10000019160
PGE 3rd LLC L13000013306
EJMP3 LLC L09000120248

Please file and return to:

Global Asset Advisors Inc.
226 W Ojai Ave
Suite 101-513
Ojai CA 93023

FILED

2014 FEB 10 PM 2:24

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EGV-1 LLC L12000155029
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT MATTHEWS

Name of Person

GLOBAL ASSET ADVISORS INC.

Firm/Company

226 W OJAI AVE, SUITE 101-513

Address

OJAI, CA 93023

City/State and Zip Code

bob@assetprotection.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bob Matthews

Name of Person

at (805)

649-8610

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

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2014 FEB 10 PM 2:24
TALLAHASSEE, FL
CLERK OF COURT

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: EGV-1 LLC

2. (a) Principal office address of limited liability company: _____

(Note: **MUST BE STREET ADDRESS**)

631 N Stephanie Street Suite 548
Henderson NV 89014

(b) Mailing address of limited liability company: _____

(Note: **MAY BE POST OFFICE BOX**)

631 N Stephanie Street Suite 548
Henderson NV 89014

12/11/2012

L12000155029

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:

Spiegel & Utrera PA

Registered Office Address:

1840 SW 22nd St
4th Floor
Miami FL 33145

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address:**

NEW Registered Agent:

Registered Agents Inc.

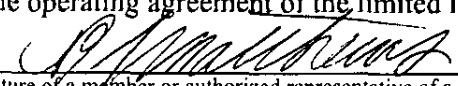
NEW Registered Office Address:

3030 N. Rocky Point Dr. STE 150A

(MUST BE FLORIDA STREET ADDRESS)

Tampa, FL 33607

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.


Signature of a member or authorized representative of a member

ROBERT MATTHEWS
Printed or typed name of signee

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.


Signature of Registered Agent

Dan Keen-President

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00