## 13000012571

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(Address)			
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B. BOSTICK AUG **3 0** 2013

EXAMINER

## **COVER LETTER**

Division of Corporations	
,	
SUBJECT: WEBER INVESTMENTS GROUP,	
Name of L	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Of	ffice Change and fee(s) are submitted for filing.
Please return all correspondence concerning t	this matter to the following:
LYMAN S. BRADFORD IV, ESQ.  Name of Person	
NORTHPOINT LAW, P.A. Firm/Company	
801 NORTHPOINT PARKWAY Address	
WEST PALM BEACH, FLORIDA 33407 City/State and Zip Code	2013 AUG 29 PH 12: 5
BRAD@NORTHPOINTLAW.COM E-mail address: (to be used for future annual report no	PH 12: 55
For further information concerning this matte	er, please call:
LYMAN S. BRADFORD IV, ESQ.  Name of Person	at ( 561 ) 275-1500 (Local) / 888-333-9871 (Toll Free 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 followin	g amount:
	□ \$55 Filing Fee & Certified Copy

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pu : lia : ag	rsuant to the provisions of sections 608.416 or 608.2 bility company submits the following statement in orders, or both, in the State of Florida.	508, Florida Statutes, the undersigned limited er to change its registered office or registered
1.	Name of the limited liability company: WEBER INVEST	MENTS GROUP, LLC
2.	(a) Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	y: 150 S. SIMPSON STREET MOUNT DORA, FL 32757
	(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	150 S. SIMPSON STREET MOUNT DORA, FL 32757
	01/24/2013	L13000012571
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:	RICHARD S. BERGHOLTZ, P.A.
	Registered Office Address:	MOUNT DORA, FLORIDA 3275
		AUG
	(b) Enter name of <b>NEW Registered Agent</b> and/or <b>NE</b>	
	NEW Registered Agent:	NORTHPOINT LAW, P.A.
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	801 NORTHPOINT PARKWAY 15
	(MUST BE FLORIDA STREET ADDRESS)	WEST PALM BEACH ,FL 33407
eo an lia the the	the limited liability company is not organized under the onfirmed that after the change or changes are made, the Find the business office of the registered agent will be identified to company, it is hereby confirmed that the change(see members of the limited liability company or as otherwise operating agreement of the limited liability company.	florida street address of the registered office tical. Or, in the case of a Florida limited
Pr	ANDREW C. WEBER inted or typed name of signee	<del>-</del>
I . co an CI aa	hereby accept the appointment as registered agent and a omply with the provisions of all statutes relative to the pi ad I am familiar with and accept the obligations of my po- hapter 608, F.S. Or, if this document is being filed to ma laress, I hereby confirm that the limited liability compar	ngree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.
Si	gnatur of Registered Agent President,	41
	Northpoin  Division of Cornerations P.O. Roy 6	t Law, P.A. 327 Tollohassee FL 32314

**FILING FEE: \$25.00**