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RECRETARY OF STATE
SECRETARY OF STATE
AND AN ANSSEE, FLORIDA

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: PFFL, LLC			
Nan	ne of Limited L	iability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Off	fice Change and	fee(s) are submitted for filing.	
Please return all correspondence concerning th	nis matter to the	following:	
, ,		C	
ALAN G. GEFFIN			
Name of Person			
GPG LAW			
Firm/Company		, 	TWI.
1326 SE 3RD AVENUE			FILED  APR 10 PN 3 28  CRETARY OF STATE LANASSEE, FLORIDA
Address		<del></del>	SSE OF LE
FORT LAUDERDALE, FL. 33316			THE P
			ORIE ORIE
City/State and Zip Code			₩ œ
jeanine@gpglawfirm.com			
E-mail address: (to be used for future and	nual report notif	ication)	
For further information concerning this matter,	, please call:		
ALAN G. GEFFIN, ESQ	954 at (	533-5530	
Name of Person	at (	Area Code & Daytime Telep	hone 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	<b>□</b> \$:	55 Filing Fee & Certified Copy	
INHS18 (2/14)			

## 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	Name of the limited liability company: PFFL, LLC			-
		(b)	)	lress of limited liability company:
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			lress of limited liability company:  1AY BE POST OFFICE BOX)
	212 WEST PADONIA ROAD		212 WEST PAD	ONIA ROAD
	TIMONIUM, MD 21093		TIMONIUM, MD	21093
	06/21/2013	1	L13000090011	
3.	Date of filing/registration in Florida	4.	Docume	nt number
5. (a	)			
J. (a	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State:	
	ALAN G. GEFFIN		•	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	,	
	101 NE 3RD AVENUE, SUITE 1110			TASE SE
	FORT LAUDERDALE , FI	33301		E SECTION
	, , ,	<b></b>		ILED ARY OF ASSEC, F
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>			MG - M
	Enter name of NEW Registered Agent and/or NEW Registered	l Office add	ress:	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
				3 28 TATE ORID!
	NEW Registered Office Address:			, , , , , , , , , , , , , , , , , , ,
	1326 SE 3RD AVENUE			
	FORT LAUDERDALE , FI	33316		
the cl agent	limited liability company is not organized under the la nange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li- were authorized by an affirmative vote of the members ticles of organization or the objecting agreement of the	ws of the if the regis iability co	State of Florida, it is tered office and the mpany, it is hereby of ted liability company	business office of the registered confirmed that the change(s) by or as otherwise provided in
L	la I III	ALA	4 G GOTTO	Amorna, W FACT
_	nature of a member or authorized representative of a member			typed name of signee
I her provi the or to me notifi	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I ded in writing of this change	ree to act e performa ed for in C hereby co	in this capacity. I fi ince of my duties, ch 'hapter 605, F.S. Or infirm that the limite	uriner agree to comply with the id I am familiar with and accept r, if this document is being filed id liability company has been
Signa	ture of Registered Agen			