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COVER LETTER

INHS18 (2/14)

TO: Registration Sec Division of Corp					
SUBJECT: Braden D	evelopment, LLC				
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered	Agent/Registered Office Cha	inge and fe	ee(s) are submitted for filing.		
Please return all correspo	ondence concerning this matte	er to the fo	llowing:		
Brenden S. Moriarty	Esquire				
1	Name of Person	•	_		
Moriarty & Chiofalo,	P.A.				
1	Firm/Company		-		
1001 Third Avenue V	Vest, Suite 650				
	Address		•		
Bradenton, Florida 3	4205				
City	State and Zip Code		•		
bmoriarty@suncoast	legalgroup.com				
E-mail address: (to	be used for future annual repo	ort notifica	tion)		
For further information c	oncerning this matter, please	call:			
Brenden S. Moriarty	at (941	749-0075		
Name of	Person	1	Area Code & Daytime Telephone Number		
STREET/COUR Registration Sect Division of Corpo Clifton Building 2661 Executive O Tallahassee, Flor	orations Center Circle	Regis Divis P.O. I	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, Florida 32314		
Enclosed is a ch	eck for the following amoun	ıt;			
2 \$25 Filing Fee		□ \$551	Filing Fee & Certified Copy		

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. Ŋ	ame of the limited liability company: Braden Devel	opment,	LLC		<u> </u>		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (9)	<u> </u>	Mailing address of limited (Note: MAY BE POST	liability comp	any:	
	6994 74th Street Circle East		same				
	Bradenton, Florida 34203						
	June 17, 2014	L	140000	96903			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)				_			
, ,	Registered Agent and Registered Office shown on the records of the Gaby Gadah	he Flórida I	ept. of Sta	te:			
,	Registered Office Address (MUST BE FLORIDA STREET A 3649 Tallevast Road	DDRESS)		-			
	Sarasota , FL	34243		_			
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered 6</u> Brenden S. Moriarty, Esquire <u>NEW Registered Office Address:</u>	Office addr	ess:	-	SECRETARY OF STATE TALLAHASSEE, FLORID	15 JAN -2	7.
~	1001 Third Avenue West, Suite 650				EE,	LED 2 AM	C.
	Bradenton , FL	34205		- 	- STATE FLORIDA	3: 25	
the cha agent v	imited liability company is not organized under the law inge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the registe bility con f the limit	ered offic ipany, it i ed liabili	e and the business off is hereby confirmed th ty company or as othe	ice of the re at the chang	gistered ge(s)	
	Som	Amir	Androu				
Signa	ture of a member or authorized representative of a member			Printed or typed name of	₩	and also	
705	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address, I have registered of the address, I have registered of the change.	ze to act i performa I for in CI ereby con	n this cap ace of my napter 60. firm that	pacity. I further agree duties, and I am fami, 5, F.S. Or, if this doci the limited liability co	to comply v liar with and ument is bein ompany has	with the d accept ng filed been	
Signatu	re of Registered Agent						

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00