120000126644

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COVER LETTER

TO:

INH\$18 (2/14)

Registration Section

Division of Corporations		
SUBJECT: AITKENS SROUP Name of Lim	ited 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:		
BYREN AITHEN Name of Person AITHEN SERVE LLC Firm/Company		
3706 GREENWOOD AVE Address		
City/State and Zip Code Japan T 123 (Value Cart		
E-mail address: (to be used for future annual repor	t notification)	
For further information concerning this matter, please ca	all:	
BYRON AITKEN at (56/) 860 476/ 501-5023964 Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount:		
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	

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

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability consummers to submits the following statement in order to change its registered office or registered agent, or both, in the State of I

Name of the limited liability company: AITKENS GROUP	11C
2. (a) (b)	
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability compa
	UG GREENWOOD ALC
WAST PANN BEACH, FL. 33407 WE	ET PANO BOXH, FL. 3340
	20000126644
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:
WRIGHT AYIESHH	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	202 SE
9314 FOREST HILL ROAD GE	
71/EKUNEAN FL 334/1	~ LJ
MEKUNETUN ,FL 35411	
4 1-4-1	κο 🙀 📘
(b) CSHOR A TIMEN Enter name of NEW Registered Agent and/or NEW Registered Office address:	<u> </u>
Little Marine of Control of Contr	건절 21
JOSHUA A AITKEN	
NEW Registered Office Address:	
4146 GUNCLUB KOAD	
WEST PARM BASSECT FL 33406	•
If the limited liability company is not organized under the laws of the State of	f Florida it is hereby confirmed that
change or changes are made, the Florida street address of the registered office	e and the business office of the regist
agent will be identical. Or, in the case of a Florida limited liability company, was/were authorized by an affirmative vote of the members of the limited lia	, it is hereby confirmed that the change
the articles of organization or the operating agreement of the limited liability	company.
	Printed or typed name of signee
- 6- ··································	
I hereby accept the appointment as registered agent and agree to act in this provisions of all statutes relative to the proper and complete performance of the obligations of my position as registered agent as provided for in Chapter to merely reflect a change in the registered office address, I hereby confirm to notified in writing of this change.	capacity. I further agree to comply my duties, and I am familiar with an 605, F.S. Or, if this document is be that the limited liability company has
Signature of Registered Agent	