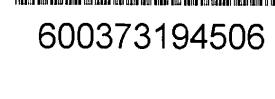
## 120000211818

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: LT PODENTY Name of Limited	Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change ar	nd fee(s) are submitted for filing.
Please return all correspondence concerning this matter to th	e following:
Stacey Majorey Name of Person  The Law Office of S Firm/Company  435 Address  Address  City/State and Zip Code	Hacey Maloney, PLACE 205
Stace to Majore Jean- E-mail address: (to be used for future annual report not	El com
For further information concerning this matter, please call:  Stacky Majorety at 94  Name of Person	1 301-881) 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

□ \$55 Filing Fee & Certified Copy

INH\$18 (2/14)

□ \$25 Filing Fee

Enclosed is a check for the following amount:

## 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. Name of the limited liability company: LT MODERTY (O. LLC
2. (a) 2605 12 HVE E #34 (b) 2605 1214 AVE E #3
Principal office address of limited liability company:  Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAX BE POST OFFICE BOX)
- Ellenton, FL 34222 Ellenton, FL 34222
8117120 62000211818
3. Date of filing registration in Florida 4. Document number
5. (a) tacky Natoney
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
435 A3 St. W.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
bradendon
- 1000 (A) TO [ ]
= 34205 \(\alpha\)
6 Gloria Giacinto
Frier name of NEW Paristand A continued in NEW Daylot and Continued Continue
S. S. T. Complete Com
NEW Registered Office Address: 721d Aug F # 214
O 1 0 7 7 2 M 1 1 F # 21/L F 3
2605 124 AVE. E #34
<u>Ellenton</u> FI 34222
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the
Charge of Charges are made, the Fiorial street andress 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.
Jalong Giacinta
Signature of a member or authorized representative of a member 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
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 605, F.S. Or if this document is being filled
the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited limited limited limited with and accept to merely reflect a change in the registered office address. Thereby confirm that the limited limited limited with a comment is the first of the limited limited.
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 605, 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 inverting of this change.