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SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

· > TO:	Registration Section Division of Corporations		
	•		
SUB	JECT:	NELSON, LC	
	Name	of Limited 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:			
	USHER L BROWN Name of Person	ι	
BR	BROWN GARGANESE WEISS & D'AGRESTA, PA Firm/Company		
111 N ORANGE AVE, STE 2000 Address			
	ORLANDO, FL 32801 City/State and Zip Code		
<u>F</u>	TAUSTIN@ORLANDOLAW.NET E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:			
	USHER L BROWN	at (407) 425-9566	
	Name of Person	Area Code & Daytime Telephone Number	
.,	STREET/COURIER ADDRESS:		
	Registration Section	Registration Section Division of Corporations	
	Division of Corporations Clifton Building	P.O. Box 6327	
	2661 Executive Center Circle	Tallahassee, Florida 32314	
	Tallahassee, Florida 32301		
Enclosed is a check for the following amount:			
	✓ \$25 Filing Fee	\$55 Filing Fee & Certified Copy	

INHS18 (5/08)

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. NELSON, LC 1. Name of the limited liability company: ___ 1150 ALBREAT R 2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 07/06/1998 L98000001032 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: USHER L BROWN 225 E ROBINSON ST Registered Office Address: SUITE 660 ORLANDO, FL. 32801 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: **DENNIS K TOWELL NEW** Registered Agent: **NEW Registered Office Address:** 1150 ALBRIGHT RD (MÚST BE FLORIDA STREET ADDRESS) SANFORD FL32771 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address 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. Signature of a member or authorized representative of a member DENNIS K TOWELL Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. If further agree comply with the provisions of all statutes relative to the proper and complete performance of my auties and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, E.S. Or, if this document is being filed to merely reflect a change in the registered office address, I bereby confirm that the limited liability company has been notified in writing of this change. Signature of Registered Agent

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