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Office Use Only



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T. BROWN



CORPORATION	SERVIC COMPANY	. ACCOUNT

COUNT NO. : I2000000195

REFERENCE : 878918 7684266

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AUTHORIZATION :

COST LIMIT :

ORDER DATE: November 8, 2013

ORDER TIME : 9:05 AM

ORDER NO. : 878918-015

CUSTOMER NO: 7684266

## CHANGE OF AGENT

NAME: BRIDLE PATH STABLES, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS:

## 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.

1. Name of the limited liability company: BRIDLE PA	TH STABLES, LLC
2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	pany: <u>C/O Ocean Lawn Enterprises, LTD</u> 1450 Madruga Ave., Suite 409
(HOLE. MOBI DE BIREEI ADDREOD)	Coral Gables, FL 33146
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	P. O. BOX 43-0850 Pro 3 MIAMI, FL 33243
(NOTE: MAT BE POST OFFICE BOX)	TT 2
12/20/2001	M01000002879
3. Date of filing/registration in Florida	4. Document number
0 0	
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of States
w	OUDDODATE ACCECU INC.
Registered Agent:	CORPORATE ACCESS, INC.
Registered Office Address:	236 EAST 6TH AVENUE
registered office redices.	TALLAHASSEE, FL 32303
(b) Enter name of <u>NEW Registered Agent</u> and/or	
NEW Registered Agent:	Corporation Service Company
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street
	Tallahassee ,FL 32301
If the limited liability company is not organized under confirmed that after the change or changes are made, the and the business office of the registered agent will be is iability company, it is hereby confirmed that the chang the members of the limited liability company or as other than the operating agreement of the limited liability company.  Mallu (a Len Bellov Rem) Signature of a member or authorized representative of a member	ne Florida street address of the registered office dentical. Or, in the case of a Florida limited sets) was/were authorized by an affirmative vote of the provided in the articles of organization or
MARTHA DE LEON RELLOC	
MARTHA DE LEON BELLOC Printed or typed name of signee	
I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of m Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability com	Sue G. Knight
Signature of Registered Agent Comparation Service Compan	a existant Vice President
Signalure of Registered Agent Corporation Service Compan	y

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