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(Requestor's Name)		
(Address)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Saskiess Entry Name)		
(Document Number)		
Certified Copies Certificates of Status		
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S. HAWKES

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**EXAMINER** 

## **COVER LETTER**

Division of Corporations		
SUBJECT: 3166 Breckwr, dar LL C Name of Limited Liability Company		
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:		
Elicot Cohex Name of Person		
Firm/Company		
4465 Northpurk DRIVE		
Colorado Springs, Lo. 80907 City/State and Zip Code		
E-mail address: (to be used for future annual report notification		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Elliof Cohen at (719) 531-5700		
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

**TO:** Registration Section

## 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: 3165	Breckenvidge LLC	
2. (a) Principal office address of limited liability company	: 4465 NORTHORE NO	
(Note: MUST BE STREET ADDRESS)	clo Elliot Long	
	(00)0, 5 printy (05, 3509)	
(b) Mailing address of limited liability company:		
(Note: MAY BE POST OFFICE BOX)	<u>_</u>	
11/22/2005	mo50000000493	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:	
Registered Agent:	Martin Charrey	
Registered Office Address:	9471 BelFort Cokale	
	Tu. Markac, F13332)	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
NEW Registered Agent:	MR. Burny Hughes	
<b>NEW</b> Registered Office Address:	900 Big Tree RA	
(MUST BE FLORIDA STREET ADDRESS)	South Day Jory, FL 32219	
If the limited liability company is not organized under the l		
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 identi- liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other	was/were authorized by an affirmative vote	
or the operating agreement of the limited liability company	wise provided in the articles of organization	
Elliet J. Cally		
Signature of a member or authorized representative of a member		
Elliot S. Cohen	-	
Printed or typed name of signee  Lhazahanaccant the appointment as registered agent and a	great o get in this canacity. I further garee to	
Thereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the program and accept the obligations of my not and accept the obligations of my not	gree to dot in this capacity. I juriner agree to oper and complete performance of my duties, sition as registered agent as provided for in	
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	ely reflect a change in the registered office has been notified in writing of this change.	
Signature of Registered Agent		

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