

MO 60 000000 895

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

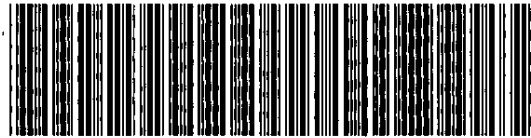
(Business Entity Name)

(Document Number)

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JUN 21 AM 11:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES
JUN 22 2010
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROBERT LEE FOWLER LLC
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:

Robert Fowler

Name of Person

Alliance Realty Group

Firm/Company

14090 Metropolis Ave, Suite 206

Address

Fort Myers, FL 33912

City/State and Zip Code

realtorfowler@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Fowler

Name of Person

at (239)

879-3579

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

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: ROBERT LEE FOWLER LLC

2. (a) Principal office address of limited liability company: _____

(Note: **MUST BE STREET ADDRESS**) 201 ORCHARD STREET
LEAVENWORTH, WA 98826

(b) Mailing address of limited liability company: _____

(Note: **MAY BE POST OFFICE BOX**) 201 ORCHARD STREET
LEAVENWORTH, WA 98826

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FLORIDA

02/08/2006
3. Date of filing/registration in Florida

M06000000895
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Robert Fowler

Registered Office Address: 7910 Summerlin Lakes Dr
Fort Myers, FL 33907

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: _____

NEW Registered Office Address: 14090 Metropolis Ave
(MUST BE FLORIDA STREET ADDRESS) Suite 206
Fort Myers, FL 33912

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.

Robert Fowler 6/16/10
Signature of a member or authorized representative of a member

Robert Fowler
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 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 608, 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 in writing of this change.

Robert Fowler 6/16/10
Signature of Registered Agent