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C. LEWIS JUL 17 2012 **EXAMINER** 

## FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

07-16-2012

NAME:

EZ PAY BUILDINGS, LLC

TYPE OF FILING: CHANGE OF REGISTERED AGENT

COST: \$38 \$25.00

**RETURN:** 

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

## 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.

Name of the limited liability company:	EZ PAY BUILDINGS, LLC	
(a) Principal office address of limited liability compared.	any: 2148E Eagle Pass	
(Note: MUST BE STREET ADDRESS)		
	Wooster, OH 44691	
(b) Mailing address of limited liability company:	2148E Eagle Pass	
(Note: MAY BE POST OFFICE BOX)	Wooster, OH 44691	
October 10, 2006	M06000005603	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:	
Registered Agent:	Incorp Services, Inc.	
Registered Office Address:	17888 67TH COURT NORTH	
	LOXAHATCHEE, Florida 33470	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> : <u>NEW Registered Office Address:</u>	W Registered Office address:  National Corporate Research, Ltd., Inc.  155 Office Plaza Drive	
<u>(MUST BE FLORIDA STREET ADDRESS)</u>	Tallahassee ,FL 32301	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as office of the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	e Florida street address of the registered office entical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote perwise provided in the articles of organization	
Printed or typed name of signee	<u> </u>	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address. I hereby confirm that the limited liability company	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in nerely reflect a change in the registered office any has been notified in writing of this change.	
Signature of Registered Agent Mark Thomas, Assistant Secr	retan/	
	6327, Tallahassee, FL 32314	

**FILING FEE: \$25.00** 

INHS18 (05/08)