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J. BRYAN

OCT 24 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
Sebsee	SINESS BYOKES Limited Liability Company	ERS LLC
Dear Sir or Madam:		
The enclosed Registered Agent/Registered C	Office Change and fee(s) are subm	nitted for filing.
Please return all correspondence concerning	this matter to the following:	
Roberta Caputo Name of Person		
Capital Business By	nokers	
270 SW Norther Av	enue Shite E	121 星3721 星
Deerfield Besch, FL City/State and Zip Code	33441	1000 E
E-mail address: (to be used for future annual report in	Motification)	
For further information concerning this matter	er, please call:	
Hoberta Capito	at (954) 596 - 80 Area Code & Daytime Tel	
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 Tallahassec, Florida 3231	
Enclosed is a check for the followin	g amount:	
\$25 Filing Fee	\$55 Filing Fee & Cert	ified 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:	Business Brokers, LLC
2. (a) Principal office address of limited liability company:	270 SW Norma Are.
(<u>Note: MUST BE STREET ADDRESS</u>)	Snite Deerfield BeachFL 33441
(b) Mailing address of limited liability company:	270 SW Nativa Are
(Note: MAY BE POST OFFICE BOX)	Suite E Destricted Beach, FL 33441
4-26.2007	m0700002421
3. Date of filing/registration in Florida 4	. Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State: 4
Registered Agent:	Poberta Caputo
Registered Office Address:	Poberta Caputo 1270 SW Notiva Ave Suffe E Deerfield Beach FL 33441
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> <u>NEW Registered Agent</u> :	Registered Office address:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	270 SW Nothwa Are Snite & Doerfield Basin, FL 33441
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identic liability company, it is hereby confirmed that the change(s) of the numbers of the limited liability company or as otherworthe operation agreement of the limited liability company. Signature of a member or authorized representative of a member	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote
Printed or typed name of signee	
Lhereby accept the appointment as registered agent and ag comply with the provisions of all statules relative to the proj and I am familiar with and accept the obligations of my post chapter 608 E.S. for if this document is being filed to mere address. I hereby don't muhat the limited trability company Signalur of Registered Agent	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.