## M0700005405

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T. CLINE

OCT 27 2008

EXAMINE



## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 12, 2008

JEFFREY LANE 500 WEST PUTNAM AVENUE, 3RD FLOOR GREENWICH, CT 06830

SUBJECT: GREENWICH HIGH YIELD LLC

Ref. Number: M07000005605

We have received your document for GREENWICH HIGH YIELD LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please all (850) 245-6020.

Tammi Cline Regulatory Specialist II Letter Number: 708A00049938

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Greenwich High Yield L (Name	LC of Limited Liability Company)	<b>E</b>
Dear Sir or Madam:	•	
The enclosed Registered Agent/Registered (	Office Change and fee(s) are submitted for filing	ıg.
Please return all correspondence concerning	this matter to the following:	
Jeffrey G. Lane (Name of Person)		
Greenwich High Yield LLC (Firm/Company)	<del></del>	
500 West Putnam Avenue, 3rd Floor (Address)		
Greenwich, CT 06830		2008 SEI
(City/State and Zip Code)  For further information concerning this mat	ter, please call:	2000 OCT 24 AM SECRETARY OF TALLAHASSEE, F
Jeffrey G. Lane	_ at (203) 625-8649	B: L
(Name of Person)	(Area Code & Daytime Telephone Nun	nber) ω
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 followi	ng amount:	
<b>✓</b> \$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. N	ame of the limited liability company: Greenwich I	High Yield LLC			+
2. (a	Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	7: <u>Greenwich High Yield</u> 500 West Putnam Ave Greenwich, CT 06830	nue, 3rd Floor		E3 E3
(b	) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Greenwich High Yield 500 West Putnam Ave Greenwich, CT 06830	nue, 3rd Floor		63 62 63
	st 31, 2007 ate of filing/registration in Florida	W07000041246 4. Document number		······································	
5. (a	a) Registered Agent and Registered Office shown on	the records of the Flor	ida Dept. of State	<b>::</b>	
	Registered Agent:	Robert Marcus Lane J	r.		
	Registered Office Address:	Greenwich High Yield 2414 Treasure Island Palm Beach Gardens.	Drive		
(b	) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	·		1	4
	NEW Registered Agent:	Robert	Mascus	Lane	ער,
	NEW Registered Office Address: FN Care of (MUST BE FLORIDA STREET ADDRESS)	Greenwich High Yield 119 Ebbtide Drive North Palm Beach	LLC	<u> </u>	
that a office herel liabil limit	e limited liability company is not organized under the after the change or changes are made, the Florida street of the registered agent will be identical. Or, in the copy confirmed that the change(s) was/were authorized beity company or as otherwise provided in the articles of liability company.  The A. Lane  Ture of a member or authorized representative of a member)	et address of the regist ase of a Florida limite by an affirmative vote	orida, it is hereby ered office and the d liability compan of the members o	co <b>Ei</b> rme e b <del>usi</del> nes ny, <b>ito</b> is if the limi	S
Printe I her comp am fo F.S. confi	ey G. Lane ed or typed name of signee) reby accept the appointment as registered agent and a reby with the provisions of all statutes relative to the pra amiliar with and accept the obligations of my position Or, if this document is being filed to merely reflect a rem that the limited liability company has been notified  by how have the signer of Registered Agent	– oper and complete per as registered agent a change in the register d in writing of this cha	pacity. I further a rformance of my a s provided for in ( ed office address, inge.	eree to luties, and Chapter o I hereby	d I 508,
-	•				

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