

Electronic Filing Menu Corporate Filing Menu

Help

JAN 25 III E LEVREDIX

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

(a)		(	(b)		
. ("	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )	<u>,,,,,,</u> ,		Mailing address of limited liability company. (Note: MAYBE POST OFFICE BOX)	
	6 N. TEJON ST. SUITE 501		559 E Pi	ikes Peak Avenue Suite 300	
	COLORADO SPRINGS, CO 80903		Colorado	o Springs, CO 80903	
	05/15/2008		M080000	02299	
	Date of filing/registration in Florida			Document number	
(a)	CAPITOL CORPORATE SERVICES, INC.				
	Registered Agent and Registered Office shown on the records of			tate:	
	Registered Office Address <u>(MUST BE FLORIDA STREET</u> 515 EAST PARK AVENUE 2ND FL	ADDRES	<u>\$\$)</u>	tate:	
	Registered Office Address <u>(MUST BE FLORIDA STREET</u> 515 EAST PARK AVENUE 2ND FL		<u>\$\$)</u>	tate: 	
(b)	Registered Office Address <u>IMUST BE FLORIDA STREET</u> 515 EAST PARK AVENUE 2ND FL TALLAHASSEE, F C T Corporation System	ADDRES	<u>\$\$)</u>		
(b)	Registered Office Address <u>IMUST BE FLORIDA STREET</u> 515 EAST PARK AVENUE 2ND FL TALLAHASSEE, F C T Corporation System	ADDRE:	<u>\$\$9</u>	21 JAN 22	
(b)	Registered Office Address <u>IMUST BE FLORIDA STREET</u> 515 EAST PARK AVENUE 2ND FL TALLAHASSEE, F C T Corporation System	ADDRE:	<u>\$\$9</u>		
(b)	Registered Office Address <u>(MUST BE FLORIDA STREED</u> 515 EAST PARK AVENUE 2ND FL TALLAHASSEE, F C T Corporation System Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ADDRE:	<u>\$\$9</u>	21 JAN 22	

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.

What al & Gallenny	Michael R. Kolloway		
Signature of a member or puthorized representative of a member	Printed or typed name of signee		
I hereby accept the appointment as registered agent and us	gree 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change. C T Corporation System By:

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Signature of Registered Agent

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

By: