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(Requestor's Name)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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EXAMINER



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COVER LETTER

Division of Corporations	
5.5	
	Love & Associates, LLC
Name of	f Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
	<i>5</i> (<i>i</i>
Please return all correspondence concerning	ig this matter to the following:
Kathy Love	
Name of Person	
R.B. Love & Assoicates, L	IC
Firm/Company	<u> </u>
1179 Manahtan Straat	
4478 McAshton Street	
Sarasota, FL 34233 City/State and Zip Code	
City/State and Zip Code	
	La comi
Klove@servproofsouthsarasof E-mail address: (to be used for future annual repor	t notification)
'	,
For further information concerning this ma	itter, please call:
Kathy Love	at (941) 552-6319
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDDESS.
Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	
	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the follow	ing amount:
✓ \$25 Filing Fee	\$55 Filing Fee & Certified Copy

TO: Registration Section

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:	R.B. Love & Associates, LLC
2. (a) Principal office address of limited liability cor	mpany:
(Note: MUST BE STREET ADDRESS)	4478 McAshton Street Sarasota, FL 34233
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	4478 McAshton Street Sarasota, FL 34233
8/27/09	M0900003397
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	n on the records of the Florida Dept. of State:
Registered Agent:	Ricki B Love
Registered Office Address:	طحہ ط ہدہ McAshton Street Sarasota, FL 34233
(b) Enter name of <u>NEW Registered Agent</u> and/o <u>NEW Registered Agent</u> : <u>NEW Registered Office Address:</u>	Ricki B. Love 4478 McAshton Street
(MUST BE FLORIDA STREET ADDRESS)	Sarasota ,FL 34233
If the limited liability company is not organized unde confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the char of the members of the limited liability company or as or the operating agreement of the limited liability con Ruch Bayes. Signature of a member or authorized representative of a member Ricki B Love	the Florida street address of the registered office identical. Or, in the case of a Florida limited nge(s) was/were authorized by an affirmative vote otherwise provided in the articles of organization
Printed or typed name of signee	——— 5m 33
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of a Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability confirm that the limited liability confirmation of Registered Agent	and agree to act in this capacity. I further agree to he proper and complete performance of my duties, ny position as registered agent as provided for in to merely reflect a change in the registered office npany has been notified in writing of this change.

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