M11000002376

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PURITAN TAMPA, L.L.C.

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TIMOTHY J. BRADLEY

Name of Person

BRADLEY & MOREAU

Firm/Company

1318 CAMELLIA BOULEVARD

Address

LAFAYETTE, LA 70508

City/State and Zip Code

tim@realtitle.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Timothy J. Bradley

...337

235-4660

Name of Person

Area Code & Daytime Telephone Number

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 following amount:

■ \$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. Na	ame of the limited liability company: PURITAN TAMPA, L.	L.C.			
2. (a)	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	y: 103 ROSEDALE DRIVE LAFAYETTE, LA 70508-9104			
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SAME			
May 9, 3	2011	M11000002378			
3. Da	ate of filing/registration in Florida	4. Document number			
5. (a	Registered Agent and Registered Office shown on	the records of the Florida I	Dept. of S	tate:	
	Registered Agent:	ROBERT GRIFFITS			
	Registered Office Address:	5217 81ST ST. N #10 ST. PETERSBURG, FL 33709	SECRE	20 3 DCT	
(b)	Enter name of NEW Registered Agent and/or NE	W Registered Office add		1 7	ÿ
	NEW Registered Agent:	IVONNE ROSADO	F1-<	-0	
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8609 POSTWOOD CIRCLE	Est Off Art	1 :2	
MUST BE FLURIDA STREET ADDRESS		TAMPA	FL3	33614	
confinand the inthe of	limited liability company is not organized under the rmed that after the change or changes are made, the land business office of the registered agent will be ider ity company, it is hereby confirmed that the change sembers of the limited liability company or as otherwork that the change sembers of the limited liability company.	Florida street address of the	registered	d offici ited	e ote of or
	RO PAUL BEAULLIEU	<u> </u>			
I her comp and I Chap addre	eby accept the appointment as registered agent and ly with the provisions of all statutes relative to the part amount and familiar with and accept the obligations of my part of the part	327, Tallahassee, FL 323		r agre ny duti ed for ed offic chang	e to ies, in ce ge.
	FILING FEE:	\$25.00			