M100000 2893

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PICK-UP WAIT MAIL		
(Business Entity Name)		
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T. HAMPTONI
JUN 1 7 2011
EXAMPLETA

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: 815 WA	JHINGTON LC	
Name of Limi	ted Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	ee Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Resecca Salz	2/	
6/3 TONT DAVIDS HOM Firm/Company	25	
1420 Celebration Bl. Address	1d Ste 200	
Celebration FL 3 City/State and Zip Code	, 4747.	
E-mail address: (to be used for future annual report notific	ation) Com	
For further information concerning this matter, p	please call:	
RéSecra Salzer at	(407) 9229011	
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 608.50 liability company submits the following statement in order agent, or both, in the State of Florida.	08, Florida Statutes, the undersigned limited r to change its registered office or registered
1. Name of the limited liability company: 815 v	DATHINGTON LL (
2. (a) Principal office address of limited liability company	CO TONY DAVIOS HOMES
(Note: MUST BE STREET ADDRESS)	420 Celebration Blud. Steron Cerebration F1 34747.
(b) Mailing address of limited liability company:	Same 7
(Note: MAY BE POST OFFICE BOX)	
6 17 12011 3. Date of filing/registration in Florida	M 11 00000 2893 4. Document number
5. (a) Registered Agent and Registered Office shown on t	
Registered Agent: ((- 114 - 1)	TOBY ASHTON
Registered Office Address:	C/o TONY DAVIDS DONES 1420 Celebration Blvd Ste 200, Celebration FL 34747.
(b) Enter name of NEW Registered Agent and/or NEW	W Registered Office address:
NEW Registered Agent:	Rebecca Salzer
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	SAME AS EXITING
	"FL
If the limited liability company is not organized under the liconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other the operating agreement of the limited liability company	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization
Signature of a member or authorized representative of a member	SION (
REISECLA SALZER Printed or typed name of signee	ARY OR AN
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the provisions of all statutes relative to the provision and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to some some some some some some some som
RAL	nas been notified in writing of this change.

Signature of Registered Agent