## 10300003441

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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11/04/09--01013--012 \*\*25.00



D. BRUCE

NOV 5 2009

**EXAMINER** 

## **COVER LETTER**

TO:	_	ation Section n of Corporations					
SUB	SUBJECT: Snowman Rentals, LLC  Name of Limited Liability Company						
D	G!						
Dear	Sir or Ma	aam:					
The e	nclosed R	egistered Agent/Registered	Office (	Change	and	fee(s) are submitted for	filing.
Pleas	e return al	l correspondence concernir	ng this m	atter to	the	following:	
		Steve Presley	<del></del>				
		Name of Person					
		Snowman Rentals, LLC Firm/Company	;		_		_,
		232 Stanley Park Lane			<del></del>		09 NOI SECRE
		Franklin, TN 37069					09 NOV -4 PH 4:27 SECRETARY OF STATE ALLAHASSEE. FLORIDA
		City/State and Zip Code			_		FLO
F	-mail addres	presley011@comcast.rs: (to be used for future annual repo	net t notification	on)			: 27 ATE RIDA
For fi	urther info	ormation concerning this ma	atter, ple	ase call	:		
	Steve	or Teresa Presley	at (	615	_)_	599-6537	,
	1	Name of Person			Area (	Code & Daytime Telephone Nu	imber
	Registra Division Clifton I 2661 Ex	T/COURIER ADDRESS: tion Section of Corporations Building ecutive Center Circle see, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
	Enclose	ed is a check for the follow	ing am	ount:			
	\$25 1	Filing Fee		<b>S</b> 5	5 Fi	ling Fee & Certified Co	ру

## 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:	Snowman Rentals, LLC						
2. (a) Principal office address of limited liability company	7: 1865 AIRLANE DR., STE. 5						
(Note: MUST BE STREET ADDRESS)	NASHVILLE TN 37210						
(b) Mailing address of limited liability company:	232 Stanley Park Lane						
(Note: MAY BE POST OFFICE BOX)	Franklin, TN 37069						
9/24/03	L03000036441						
3. Date of filing/registration in Florida	4. Document number						
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
Registered Agent:	Agents and Corporations, Inc.						
Registered Office Address:	300 FIFTH AVENUE SOUTH FOR SUITE 101-330 STATE OF SUITE 101-330 STAT						
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:							
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2550 State Road 580 East						
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 organization of the limited liability company.  Signature of a member or authorized representative of a member  Steve Presley  Printed or typed name of signee  I hereby accept the appointment as registered agent and agree 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 amnamiliar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.							
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00