

L01000020427

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

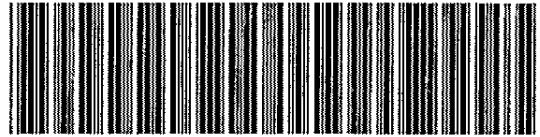
(Document Number)

Certified Copies _____

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 JUL 26 PM 3:51

N. Culligan JUL 28 2005



July 20, 2005

Amendment Section
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: Risk Services Group, LLC
Document No. L01000020427

To Whom It May Concern:

Enclosed please find a Statement of Change of Registered Office/Agent for filing with your office, along with our check in the amount of \$25.

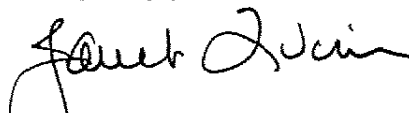
If you require further information, kindly contact the undersigned at:

BankAtlantic
2100 West Cypress Creek Road
Fort Lauderdale, FL 33309

Phone: 954-940-6398

Thank you for your attention to this matter.

Very truly yours,


Janet Quinn
Paralegal

/jlq
Enclosures

7 days a week.

**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. The name of the limited liability company is: Risk Services Group, LLC
2. The mailing address of the limited liability company is : 2100 West Cypress Creek Road
Fort Lauderdale, FL 33309

- 11/28/01 L01000020427
3. Date of filing/registration in Florida 4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

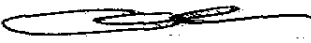
St. John Daugherty
Name
2100 West Cypress Creek Road
Address
Fort Lauderdale, FL 33309
City, State and Zip

6. The name and address of the new registered agent and/or office:

James A. White
Name
2100 West Cypress Creek Road
Florida street address (P.O. Box NOT acceptable)
Fort Lauderdale, FL 33309
City, State and Zip

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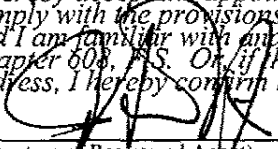
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida 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.


(Signature of a member or authorized representative of a member)

Alan B. Levan, Manager

(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 am familiar 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.


(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314