## 105000037648

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(Ad	dress)	
(Address)		
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Special Instructions to	Filing Officer:	

Office Use Only



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UNISION OF CORPORATIONS

OF OCT -2 PM 3: 52

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Visionary Consulting Green (Name of Limite	oup, LLC d 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 m	natter to the following:	
George A Ward II (Name of Person)	OF OCT -	77
Visionary Consulting Group, LLO (Firm/Company)	DINVISION OF CORPORATIONS 06 OCT -2 PM 3: 52  OF OCT -2 PM 3: 52	LETS STATE
16100 SW 51st Street		ב ב
(Address)		
Miramar, FL 33027 (City/State and Zip Code)	<del>.</del>	
For further information concerning this matter, ple	ease call:	
George A Ward II at (  (Name of Person)	786 315-7347 (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 am	ount:	_
<b>✓</b> \$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.

agona, or bons, in the place of 1 sortage.	4.4
1. The name of the limited liability company is: \( \)	√isionary Consulting Group, LLC
2. The mailing address of the limited liability com	pany is: 11266 SW 12th Street #204,
Pembroke Pines, FL 33025	
April 18, 2005	L05000037648
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the registe Florida Department of State:	red office address as shown on the records of the
Corporation Ser	vice Company
_	Name e
1201 Hays Street	6 Kg
	t 06 Visit of the second state and Zip 200 Visit of the second state a
Tallahassee, FL :	32301 年記
<u>Tallahassee, FL 3</u> City, Si	tate and Zip
	020
6. The name and address of the new registered age	nt and/or office:
George A Ward	C.3 757
	ime 55 00
1 <u>6100</u> SW 51st S	treet
	P.O. Box NOT acceptable)
riorida sireet address (	r.o. Box (NOT acceptable)
Miramar,	FL 33027
City, Sta	te and Zip
and the business office of the registered agent will liability company, it is hereby confirmed that the c	de, the Florida street address of the registered office be identical. Or, in the case of a Florida limited hange(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization company.
Cooner A Mand II	
George A Ward II	
(Printed or typed name of signee)	
I hereby accept the appointment as registered age comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 508, F.S. Or, if this document is being fill address, I hereby confirm that the limited liability of (Signature of Registered Agent)	nt and agree to act in this capacity. I further agree to o the proper and complete performance of my duties, of my position as registered agent as provided for in ed to merely reflect a change in the registered office company has been notified in writing of this change.
/- Comment of the Contract of	

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