

L03000076520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

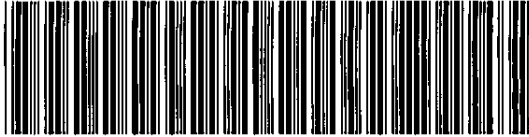
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 3, 2006

D FRANK WRIGHT ESQ
145 NORTH MAGNOLIA AVE
ORLANDO, FL 32801

SUBJECT: CEI GROUP INTERNATIONAL, LLC
Ref. Number: L05000076520

We have received your document for CEI GROUP INTERNATIONAL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6851.

Gina McLeod
Document Specialist

Letter Number: 206A00065107



WRIGHT, FULFORD, MOORHEAD & BROWN
ATTORNEYS

WRIGHT, FULFORD, MOORHEAD & BROWN, P.A.
145 NORTH MAGNOLIA AVENUE / ORLANDO, FL 32801
407 425 0234 PHONE / 407 425 0260 FAX / www.wfmblaw.com

October 27, 2006

Via U.S. Mail

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: CEI Group International, LLC

To Whom It May Concern:

Enclosed please find the original Cover Letter and Statement of Change of Registered Office/Registered Agent regarding the above-referenced matter. Also enclosed you will find my firm's check number 27474 in the amount of \$25.00 for the cost of your filing fee.

Thank you for your attention to this matter. Should you have any questions, please contact me at 800-327-0234.

Sincerely,

A handwritten signature in black ink, appearing to read 'D. Frank Wright'.

D. Frank Wright
fwright@wfmblaw.com

DFW/tr
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CEI Group International, LLC
(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:

D. Frank Wright, Esquire
(Name of Person)

Wright, Fulford, Moorhead & Brown, P.A.
(Firm/Company)

145 North Magnolia Avenue
(Address)

Orlando, Florida 32801
(City/State and Zip Code)

For further information concerning this matter, please call:

D. Frank Wright at (407) 425-0234
(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. The name of the limited liability company is: CEI Group International, Inc.

2. The mailing address of the limited liability company is : _____

Post Office Box 200, Howell, Michigan 48843

08/03/2005

L05000076520

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:

C.T. Corporation System

Name

1200 South Pine Island Road

Address

Plantation, Florida 33324

City, State and Zip

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

D. Frank Wright, Esquire

Name

145 North Magnolia Avenue

Florida street address (P.O. Box **NOT** acceptable)

Orlando, FL 32801


City, State and Zip

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.

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

D. FRANK WRIGHT - ATTORNEY
(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
FILING FEE: \$25.00

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06 NOV 14 PM 3:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA