

LO7000017824

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000246942 3)))



H070002469423ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 617-6380

From:
Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608) 827-5300
Fax Number : (608) 827-5501

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 NOV -2 AM 8:23

FILED

REGISTERED AGENT CHANGE

S1 TRAINING LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

RECEIVED
07 NOV -2 PM 3:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



October 9, 2007

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BUSINESS FILINGS

SUBJECT: S1 TRAINING LLC
REF: L07000017824

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

James Marzec signature is required if he is the new Registered Agent.

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) 245-6067.

Naysa Culligan
Document Specialist

FAX Aud. #: H07000246942
Letter Number: 707A00058259

P.O. BOX 6327 - Tallahassee, Florida 32314

H070002469423

**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: S1 Training LLC
2. The mailing address of the limited liability company is: 1467 Course View Dr.
Orange Park, FL 32003

2/15/2007

L07000017824

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:

Business Filings incorporated

Name

1203 Governors Square Blvd., Ste. 101

Address

Tallahassee, FL 32301-2960

City, State and Zip

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

James Marzec

Name

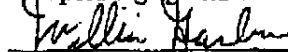
1467 Course View Dr.

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

Orange Park FL 32003

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.

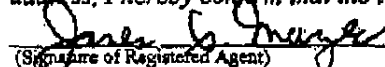


(Signature of a member or authorized representative of a member)

William Harbin, Member

(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)

James Marzec

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

INHS18(10/99)

FILING FEE: \$25.00

H070002469423

FILED
07 NOV -2 AM 8:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA