## 110000053973

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(Address)						
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## COVER LETTER

	Registration Section Division of Corporations					
SUBJE	South Florida Court Reporting, LLC					
5015.17		Limited L	iability Company			
Dear Sir	r or Madam:					
The enc	losed Registered Agent/Registered Office (	Change and	fee(s) are submitted for filing.			
Please re	eturn all correspondence concerning this ma	atter to the	following:			
Janine	e Stanislaw					
	Name of Person		_			
South	Florida Court Reporting, LLC					
	Firm/Company		_			
801 S.	Federal Highway Apt. 101					
	Address		<del>_</del>			
Pompa	ano Beach, FL 33062					
	City/State and Zip Code					
janines	southflorida123@gmail.com					
E-1	mail address: (to be used for future annual r	eport notif	ication)			
For furth	her information concerning this matter, plea	se call:				
Janine	Stanislaw 	954	629-3287			
	Name of Person	\ <u></u>	Area Code & Daytime Telephone Number			
   	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	istration Section Registration of Corporations Division Building P.O.  Executive Center Circle Talla				
Enclosed is a check for the following amount:						
ţ	☑ \$25 Filing Fee	<b>□</b> \$5	5 Filing Fee & Certified Copy			
INHS18 (	(2/14)					

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	lame of the limited liability company: South Florida	a Court	Reportin	g, LLC		
2. (a)						
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	801 S. Federal Highway Apt. 101		801 S.	Federal Highway Apt. 101		
	Pompano Beach, FL 33062		Pompa	pano Beach, FL 33062		
	5/18/2010		L10000	53973		
3.	Date of filing/registration in Florida	- 4.		Document number		
5. (a	)					
`	Registered Agent and Registered Office shown on the records of	the Florida	a Dept. of St	ate:		
	Janine Stanislaw			_ <b>5 2 3 3</b>		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	(old address) 2870 NE 14 Street 104C			黄刀		
	Pompano Beach, FI	33062	3062			
	_			- P.		
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			_		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			景元 5		
	Janine Stanislaw					
	NEW Registered Office Address:	_	_			
	801 S. Federal Highway Apt. 101					
	Pompano Beach	33062		_		
	, FL		_			
the ch agent was/w	limited liability company is not organized under the lar ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- tere authorized by an affirmative vote of the members of cicles of organization or the operating agreement of the	f the regis ability co of the lim	stered offic Impany, it iited liabili	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in		
H	au Maslau		•	islaw MGRM		
Kign	ature of a member or authorized representative of a member			Printed or typed name of signee		
the ob to mer	thy accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered office address. It does not this change.	ree to act perform d for in ( hereby co	in this cap ance of my Thapter 60 Onfirm that	pacity. I further agree to comply with the eduties, and I am familiar with and accept 3, F.S. Or, if this document is being filed the limited liability company has been		
U/ [/ Signati	ure of Registered Agent					

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