## M05000000320

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP · WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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T. HAMPTON

## **COVER LETTER**

TO: Registration Section Division of Corporations		
2-G PROPERTIES, LLC SUBJECT:		
Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered C	Office Change and fec(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Denise Bell		
Name of Person	<del></del>	
NRAI Corporate Services		
Firm/Company		
1021 Main Street, Ste. 1150		
Address		
Houston, TX 77002		
City/State and Zip Code		
JULIE.ERWIN@ELCOMSALES.COM		
E-mail address: (to be used for future annual report no	otification)	
For further information concerning this matter	er, please call:	
Denise Bell	800 862-5438 at ( )	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following	g amount:	
<b>☒</b> \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	



February 14, 2013

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

RE: 2-G Properties, LLC

Dear Filing Officer:

Please file the attached Change of Agent for the referenced company. Enclosed please find a check for the requisite fees. Please return evidence of filing to my attention via regular mail.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (800) 862-5438. Thank you very much for your assistance.

Very truly yours,

Denise Bell

Senior Corporate Specialist

Encl.

## 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. Name of the limited liability company: 2-G PROPERTIES	S, LLC	
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	: 470 PROVIDENCE MAIN ST NW, SUITE 303 HUNTSVILLE, AL 35806	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
11/08/2005  3. Date of filing/registration in Florida	M05000006320 4. Document number	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
Registered Agent:	TOM BUCINSKI	
Registered Office Address:	1331 SOUTH INTERNATIONAL PARKWAY SUITE 1261 LAKE MARY FL 32746	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
NEW Registered Agent:	NRAI Services, Inc.	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	515 East Park Avenue	
	Tallahassee ,FL 32301	
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		
Kerry Erwin Printed or typed name of signee	H ORS	
I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company NRAI Services, Inc.  By:  Signature of Registered Agent	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.	
Dealse Bell, Asst. Secq. Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314		
FILING FEE: \$2	·	

INHS18 (05/08)