## MU8000UU4671

(Requestor's Name)		
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
,		

Office Use Only

B. KOHR

NOV - 4 2011

**EXAMINER** 



300212025413

SHEATH OF ACTION OF THE STATE O

S OF AV TO AND THE SERVICE S

TI NOV -L PM 1: 31



ACCOUNT NO. : I2000000195

REFERENCE: 968783

7856262

AUTHORIZATION :

COST LIMIT : \$ 29

ORDER DATE: November 4, 2011

ORDER TIME : 10:08 AM

ORDER NO. : 968783-002

CUSTOMER NO: 7856262

## CHANGE OF AGENT

NAME: GARVER, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

## 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 Publicity 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: GARVER ENG	INEERS, LLC	
2. (a) Principal office address of limited liability company: ( <i>Note: MUST BE STREET ADDRESS</i> )	4701 Northsore Dr., Little Rock AR 72118	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	4701 Northsore Dr., Little Rock AR 72118	
10/20/2008	M08000004671	
3. Date of filing/registration in Florida 4	. Document number	
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:	
Registered Agent:	GARVER, LLC	
Registered Office Address:	1234 Airport Road	
	Suite 126  Destin FL 32541	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> NEW Registered Agent:	Registered Office address:  Corporation Service Company	
	1201 Hays Street	
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301	
If the limited liability company is not organized under the la that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cashereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company.  Maure attely	address of the registered office and the business se of a Florida limited liability company, it is	
Signature of a member or authorized representative of a member)		
Maureen Cathell, Authorized Person (Printed or typed name of signee)		
I hereby accept the appointment as registered agent and agreemently with the provisions of all statutes relative to the propage familiar with and accept the obligations of my position a F.S. Or, if this document is being filed to merely reflect a checonfirm that the limited liability company has been notified in	ree to act in this capacity. I further agree to ber and complete performance of my duties, and I s registered agent as provided for in Chapter 608 lange in the registered office address, I hereby in writing of this change.	
By: Suria Ouros T	ylvia Queppet, Asst Vice President	

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

INHS18 (05/08)