

L04000015343

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

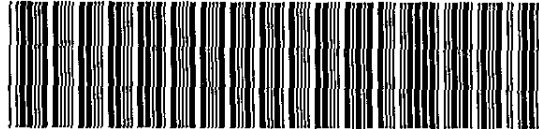
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TALLAHASSEE, FLORIDA  
RECEIVED

CORP DIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

CONTACT: ED

DATE: 07/13/05

REF. #: 1133.40073

CORP. NAME: ZP&W INVESTIGATIONS, LLC

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION         | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT                     | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME         |
| <input type="checkbox"/> FOREIGN QUALIFICATION             | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input type="checkbox"/> LIMITED LIABILITY       |
| <input type="checkbox"/> REINSTATEMENT                     | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL              |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION       |   |  |
| <input checked="" type="checkbox"/> OTHER: CHANGE OF AGENT |   |  |

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STATE FEES PREPAID WITH CHECK# 513271 FOR \$ 25.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> CERTIFIED COPY        | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS |   |  |


Examiner's Initials

**STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT 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 ZP&W Investigations, LLC.
2. The mailing address of the limited liability company is 999 Ponce de Leon Boulevard, Penthouse 1110, Coral Gables, FL 33134.
3. The limited liability company was formed on ~~December 2, 2003~~ and assigned document number ~~L03000049002~~. **2/26/04 EFFECTIVE 2/25/04**
4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State is CorpDirect Agents, Inc., 103 Meridian Street, Tallahassee, FL 32301.
5. The name and address of the new registered agent is David Winker, Esq., 999 Ponce de Leon Boulevard, Penthouse 1110, Coral Gables, FL 33134.

It is hereby confirmed that the forgoing change was duly authorized by the members of the limited liability company.

  
By: David J. Winker  
Its: Chief Operating Officer

*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.*

  
David J. Winker

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