L09000029393

(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:	
A _	
A. LUNT	
APR 14 2009	
EXAMINER	

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: PLC Foram, LLC (Name of Lin	nited Liability Company)		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing	ļ.	
Please return ail correspondence concerning this n	natter to the following:		
William G. Urban, II (Name of Person)			
(Name of Person)	Ĩ	2009 APR 10 PM 1:54 SECRETARY OF STATE TAIL AHASSEE, FLORID	
	2		Ī
Foram Group, Inc. (Firm/Company)		APR 10 PM ARETARY OF S AHASSEE, FL	-
(i init company)		333 3 45 0 0	7
777 Deletell Access College 000			
777 Brickell Avenue, Suite 808 (Address)		OR I	
` '			
Miami, Florida 33131	٤,	,	
(City/State and Zip Code)			
• • •			
For further information concerning this matter, ple	ease call:		
William G. Urban, II at (305) 358-9807		
(Name of Person)	(Area Code & Daytime Telephone Numb	per)	
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section Division of Corporations	Registration Section 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 am	ount:		
✓ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

INHS18 (5/08)

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: PLC	Foram, LLC
2. (a) Principal office address of limited liabilit (Note: MUST BE STREET ADDRESS	y company: 777 Brickell Avenue, Suite 808 Miami, Florida 33131
(b) Mailing address of limited liability comparing (Note: MAY BE POST OFFICE BOX)	
March 26, 2009	L09000029393
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office Registered Agent:	shown on the records of the Florida Dept. of STATE TO SHOW THE PROPERTY OF STATE OF
Registered Office Address:	777 Brickell Avenue, Suit 808 Miami, Florida 33131
(b) Enter name of NEW Registered Agent a	
NEW Registered Agent:	William G. Urban, II
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDR	ESS) Miami T,FL 33131
that after the change or changes are made, the FI office of the registered agent will be identical. Chereby confirmed that the change(s) was/were at	under the laws of the State of Florida, it is hereby confirmed orida street address of the registered office and the business or, in the case of a Florida limited liability company, it is athorized by an affirmative vote of the members of the limited exarticles of organization or the operating agreement of the

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

Loretta H. Cockrum

(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)