## L060000061545

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PICK-UP WAIT MAIL			
· (Business Entity Name)			
(Document Number)			
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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

JUL - 9 2009

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: ADVANCED MANAGEMENT	HOLDINGS, LLC			
(Name of Limited Liability Company)				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
MANK TYA ILILY (Name of Person)				
Advanced MANAgeme	at Holdings, LC			
806 Earl Lake Rd	<del></del>			
BNANDON FL 33510 (City/State and Zip Code)	)			
For further information concerning this matter, pl	icase call:			
(Name of Person) at (	(813 ) 938-9208 (Area Code & Daytime Telephone Number)			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy			

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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	e of the limited liability company: ADVANCE	MANAGEMENT HOLDINGS, LLC	-	
2. (a) P	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)		- -	
(b) 1	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	806 ERIK LAKE ROAD BRANDON FL 33510	 	
06/15/2	2006	L08000081545		
3. Date	of filing/registration in Florida	4. Document number	-	
5. (a) ]	Registered Agent and Registered Office shown or	the records of the Florida Dept. of State:		
1	Registered Agent:	NRAI SERVICES, INC	d., 0	
1	Registered Office Address:	2731 EXECUTIVE PARK DRIVE, SUITE 4	09 JUL -8 F	
		WESTON FL 33331 US		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:	B PM 12: 48 RY OF STATE SEE, FLORID	
NEW Registered Agent: NEW Registered Office Address:	17888 67th Court North	:. <b>48</b>		
1	(MUST BE FLORIDA STREET ADDRESS)	Loxahatchee FL 33470	_ TP	
that after of hereby of hereby of hereby of historian desired of hereby of hereby of hereby comply am family of confirm	mited liability company is not organized under the rithe change or changes are made, the Florida street fithe registered agent will be identical. Or, in the confirmed that the change(s) was were authorized company or as otherwise provided in the articles liability campany.  A word a member or authorized representative of a member)  A voccept the appointment as registered agent and with the provisions of all statutes relative to the publicar with and accept the obligations of my position, if this abcument is being filed to merely reflect a that the limited liability company has been notificed of Registered Agent.	et address of the registered office and the busicase of a Florida limited liability company, it is by an affirmative vote of the members of the lof organization or the operating agreement of	ness s imited the	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314				

INHS18 (05/08)