Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000289706 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)705-7274

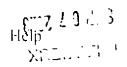
Email Address:

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC REGISTERED AGENT CHANGE FACC SERVICES GROUP, L.L.C.

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	COVER LETTER					
~	Registration Section Division of Corporations					
SUBJECT:	FACC SERVICES GROUP, L	LC.				
30bJLC1.		Name of Limited	Liability Company			
Dear Sir or M	dadam:					
The enclosed	I Registered Agent/Registere	d Office Change an	d fee(s) are submitted for filing.			
Please return	all correspondence concerni	ng this matter to th	e following:			
Mary Castillo	,					
	Name of Person					
Registered Ag	gent Solutions, Inc.					
	Firm/Company					
Corporate Ce	nter One, 5301 Southwest Pkwy	. Ste 400				
	Address					
Austin, TX 78	8735					
	City/State and Zip Co	ode				
E-mail	address: (to be used for futur	e annual report not	ification)			
For further in	nformation concerning this m	atter, please call:				
Mary Castille		888 at (705-7274			
	Name of Person		Area Code & Daytime Telephone Number			
Reg Divi P.O.	ling Address: istration Section sion of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Encl	osed is a check for the follo	wing amount:				
	25 Filing Fee	•	\$55 Filing Fee & Certified Copy			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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)	3544 MACLAY BEVD		(b) 3544 MACLAY BLVD				
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		•	Mailing address of limited liability of	Mailing address of limited liability company (Nate: MAY BE POST OFFICE BOX)		
	TALLAHASSEE, FL 32312			TALLAHASSEE, FL 32312			
	6/21/2000	<u> </u>		1.00000007265			
	Date of filing/registration in Florida	4.	-	Document number			
>	BAGGETT, FRED W						
a)	19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CA 19	. ,	13 13			
а)	Registered Agent and Registered Office shown on the records 101 E. College Avenue	of the Flor	ida	ida Dept. of State:			
a)	•						
a)	101 E. College Avenue	T ADDRE	SS	<u>'SS)</u>	5		
	101 E. College Avenue Registered Office Address (MUST BE FLORIDA STREE	T ADDRE	SS	<u>'SS)</u>			
n) .	101 E. College Avenue Registered Office Address (MUST BE FLORIDA STREE) Tallahassee	T. ADDRE	(SS)	SSS)			
n) .	Tallahassee Registered Agent Solutions, Inc.	T. ADDRE	(SS)	SSS)			
n) .	Registered Office Address (MUST BE FLORIDA STREE Tallahassee Registered Agent Solutions, Inc. Enter name of NEW Registered Agent and/or NEW Register	T. ADDRE	(SS)	address.	· · · ·		
n) .	Tallahassee Registered Agent Solutions, Inc. Enter name of NEW Registered Agent and/or NEW Registered Agent Solutions.	T. ADDRE	(SS)	address.	· · · · · · · · · · · · · · · · · · ·		

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.

8 Dana Forehand	Dana Forehand	Authorized Signer	
Signature of a member or authorized representative of a member	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 605, 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.

Mackenzie Hibler, Asst, Secretary Signature of Registered Agent