

L02000000609

NEWTON & CLAWSON FINANCIAL SERVICES, LLC

1200 Weston Road
Weston, Florida 33326
(954) 389-6930

5/1

MJH

March 7, 2002

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

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-03/11/02--01082--012

*****25.00 *****25.00

00189-00504-00671
attached forms

Re: Change of Address for Registered Agent
Newton & Clawson Financial Services, LLC
Corporation Number L02000000609

Dear Sir/Madam:

This letter is to formally request that you change the address of record for the Registered Agent of Newton & Clawson Financial Services, LLC, from

2930 Medinah
Weston, FL 33332

to:

1200 Weston Road
Third Floor
Weston, FL 33326

FILED
02 MAY -7 PM 4:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

The name of the Registered Agent remains unchanged. Enclosed herewith please find a check in the amount of \$25.00 to cover the filing fee.

I thank you in advance for your prompt attention to and anticipated cooperation in this request. If you have any questions, please do not hesitate to contact me at any time.

Very truly yours,



Michael D. Newton
Registered Agent

Enclosure: \$25.00 check



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 22, 2002

MICHAEL D. NEWTON
NEWTON & CLAWSON FINANCIAL SERVICES, LLC
1200 WESTON ROAD
WESTON, FL 33326

SUBJECT: NEWTON & CLAWSON FINANCIAL SERVICES, LLC
Ref. Number: L02000000609

We have received your document for NEWTON & CLAWSON FINANCIAL SERVICES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached forms to change the Registered Office of this LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 002A00017355

**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. The name of the limited liability company is: Newton & Clauson Financial Services, LLC
2. The mailing address of the limited liability company is : 1200 Weston Road, 3rd Floor,
Weston, Florida 33326
3. Date of filing/registration in Florida January 2002
4. Document number L02000000609

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Michael D. Newton
Name
1200 Weston Road, Suite 300
Address
Weston, Florida 33326
City, State and Zip

6. The name and address of the new registered agent and/or office:

Michael D. Newton
Name
2930 Medimah
Florida street address (P.O. Box NOT acceptable)
Weston FL 33332
City, State and Zip

FILED
02 MAY - 7 PM 4:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) 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.

Michael D. Newton
(Signature of a member or authorized representative of a member)

Michael D. Newton
(Printed or typed name of signee)

04-29-02 A08:09 OUT

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.

Michael D. Newton
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314