L0200032161

(Req	u es tor's Name)	
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PICK-UP	WAIT	MAIL
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TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations	
SUBJE	BJECT:Valtraserv, LLC	
	(Name of corporation)	•
DOCU	OCUMENT NUMBER: L02000032161	
The en	e enclosed Statement of Change of Registered Office/Agent and fee are su	omitted for filing
	ase return all correspondence concerning this matter to the following:	
ricasc	ase retain an correspondence concerning this matter to the tonowing:	•
Jarroo	arrod Buchman	9 8
	(Name of person)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
المراجعة المراجعة	aliana and U.C.	是心。
valua	altraserv, LLC	1000 m
	(Name of firm/company)	
2285 1	285 Marsh Hawk Lane, #8-106	
	(Address)	
_	B 1 5 1 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2	70
Orang	range Park, Florida 32003	
	(City/state and zip code)	•
For fur	r further information concerning this matter, please call:	
1	and Developmen	
Janou	rrod Buchman at (904) 215-8484 (Name of person) (Area code & daytime teleph	
	(Area code & daytime teleph	one number)
Enclos	closed is a \$35.00 check made payable to the Department of State.	
Amend Division P.O. Bo	ailing Address: nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399	



Secretary of State

July 1, 2003

JARROD BUCHMAN VALTRASERV, LLC 2285 MARSH HAWK LANE, #8-106 ORANGE PARK, FL 32003

SUBJECT: VALTRASERV, LLC Ref. Number: L02000032161

MIS JULY MID: 19

We have received your document for VALTRASERV, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist

Letter Number: 703A00039597



July 7, 2003

Florida Department of State Division Of Corporations ATTN: JOEY BRYAN PO Box 6327 Tallahassee, Florida 32314

Ref Number: L02000032161

Dear Mr. Bryan,

I received you letter stating that I had filed the incorrect form for changing the registered agent for Valtraserv. Enclosed you will find the correct form completed.

I would like to receive a refund of the difference in filing fees for these two transactions (\$10). If you have any questions, please feel free to contact me at 904.269.8875.

Thank you.

Jarrod Buchman

Valtraserv

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: Valtracery, LLC	
2. The mailing address of the limited liability company is: 2285 MARCH ///	INT LANE.
#8-101, Drage Park, FL 32003	
12-03-02 3. Date of filing/registration in Florida LO2 0000 321 4. Document number	61
5. The name of the registered agent and the registered office address as shown on the reflected Department of State: Quincy files Incorporated Name 1000 West Avenue Suite 1114 Address	ecords of the
Address Man; Beach, FL 33139 City, State and Zip 6. The name and address of the new registered agent and/or office:	DIV. CN CI
Name 2285 MARSH HAWK (ANE #8-101 Florida street address (P.O. Box NOT acceptable)	LED -7 AM IO: 19 - CORPORATIONS ASSEE, FLORIDA
Orenze Perk FL 32003 City, State and Zip	
If the limited liability company is not organized under the laws of the State of Florida, confirmed that after the change or changes are made, the Florida street address of the rand the business office of the registered agent will be identical. Or, in the case of a Florida liability company, it is hereby confirmed that the change(s) was/were authorized by an the members of the limited liability company or as otherwise provided in the articles of the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member)	registered office
TARROD Bue thum. (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete performe and I am familiar with and accept the obligations of my position as registered agent a Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the address, I hereby confirm that the limited liability company has been notified in writin (Signature of Registered Agent)	I further agree to ance of my duties, is provided for in registered office ng of this change.