L03000000808

(Requestor's Name)			
. (Ac	idress)		
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
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S. TONER			
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Highland Oaks One 10150 Highland Manor Drive, Suite 300 Tampa, FL 33610-9712

December 18, 2012

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

> Opis Management Resources, LLC Re:

FEI/EIN Number: 743074787

Dear Sir or Madam:

Enclosed for filing please find:

- 1. Statement of Change of Registered Agent for the above Limited Liability Company; and
- 2. The required \$25.00 filing fee made payable to Florida Department of State.

Please return all correspondence concerning this matter to the following:

Opis Management Resources, LLC Attn: LaJeana C. Deane, Corporate Paralegal 10150 Highland Manor Drive, Suite 300 Tampa, Florida 33610.

Should you have any questions, please feel free to contact me at 813-558-6646 or via email at LaJeana.Deane@OpisMR.com.

Sincerely,

LaJeana C. Deane. Corporate Paralegal

Opis Management Resources, LLC

/lcd

Enclosures – as stated

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.

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1. Name of the limited liability company: Opis Managemen	nt Resources, LLC	
2. (a) Principal office address of limited liability comp	nany: 10150 Highland Manor Drive	
(Note: MUST BE STREET ADDRESS)	Suite 300	స
(NOIS: MOST BE STREET ADDRESS)	Tampa, Florida 33610	- A 98 A
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	10150 Highland Manor Drive	E. P.
	Suite 300	* TO (
	Tampa, Florida 33610	7.0
01/08/03	L03000000808	30.
······································		
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown Registered Agent:	on the records of the Florid	a Dept. of State:
Registered rigent.		
Registered Office Address:	5102 West Laurel Street	
Registered Office Address.	Suite 700	
	Tampa, Florida 33607	
NEW Registered Agent:	David Powers, Esquire	
NEW Registered Office Address:	7777 Glades Road	
(MUST BE FLORIDA STREET ADDRESS)	Suite 300	
	Boca Raton	,FL 33434
If the limited liability company is not organized under confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change the members of the limited liability company or as other than the operating agreement of the limited liability company. Signature of a number or authorized representative of a member make the confirmed or typed name of signee	he Florida street address of t dentical. Or, in the case of a ge(s) was/were authorized by erwise provided in the article	he registered office a Florida limited y an affirmative vote of
I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of m Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability com	nd agree to act in this capace e proper and complete perfo ly position as registered age o merely reflect a change in lipany has been notified in wi	city. I further agree to ormance of my duties, nt as provided for in the registered office riting of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00