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(Re	equestor's Name)	<u> </u>
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PICK-UP		MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	The Halifax Group, (Name of Corporation)	LLC		
DOCUMENT NUMBER:_	L03000019756	· ··	 	 -···,

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jaime Girald

(Name of Person)

The Halifax Group, LLC

(Name of Firm/Company)

152 W. Granada Blvd. (Address)

Ormond Beach, Florida 32174 (City/State and Zip Code)

For further information concerning this matter, please call:

 Becky Williams
 at (386) 615-2104

 (Name of Person)

Enclosed is a check for the following amount:

□ \$35.00 Filing Fee

□ \$43.75 Filing Fee & Certified Copy

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 **KJ** \$43.75 Filing Fee & Certificate of Status

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□ \$52.50 Filing Fee, Certificate of Status & Certified Copy

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 15, 2004

JAIME GIRALD THE HALIFAX GROUP, LLC 152 W. GRANADA BLVD. ORMOND BEACH, FL 32174

SUBJECT: THE HALIFAX GROUP, LLC Ref. Number: L03000019756

We have received your document for THE HALIFAX GROUP, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is an LLC. To make the changes you would like us to file, please complete and return BOTH of the enclosed blank forms. Please return them with a copy of this letter.

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) 245-6958.

Lee Rivers Document Specialist

Letter Number: 204A00002951

Called on 1/28/14 1. Submit change of reg. agt. / Mice (\$25) form. 2. Submit ltr. & request change of PRIN. ADD. @ NO change. 3. fequent Certificate of Status (\$500). B. Williams



January 28, 2004

Mr. Lee Rivers, Document Specialist Florida Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: THE HALIFAX GROUP, LLC Ref. No.: L03000019756

Dear Mr. Rivers:

Enclosed is a "Statement of Change of the Registered Agent & Office" for The Halifax Group, LLC. Also, please change the <u>principal address from 533</u> Seabreeze Blvd., Suite 300, Daytona Beach, FL 32118 to:

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152 W. Granada Boulevard Ormond Beach, FL 32174

Please file this change (\$25) and send back a Certificate of Status (\$5). You have previously received a check for \$43.75; therefore, please refund the \$13.75 overpayment. Thank you very much for a prompt response. If you have any questions, I can be contacted at 386-615-2104.

Sincerely.

Becky Williams Office Manager

Enclosures: Letter #204A00002951

Articles of Amendment for Corporation (returned)

LLC Statement of Change of Registered Office & Agent

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: <u>The Halifax Group, LLC</u>

2. The mailing address of the limited liability company is : 152 W. Granada Boulevard,

Ormond Beach, F	'L 321	74
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June 2, 2003 _____L03000019756

3. Date of filing/registration in Florida

4. Document number

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. BOSWELL, ESQ.				
	Name				-
	533 Seabreeze Blvd., Suite 300 Address	-			- ئىد .
	Daytona Beach, FL 32118		်စ္စ	9	- - اس
	City, State and Zip		<u>т</u>	VISI	
6. The name and address	of the new registered agent and/or office:		EB -1	CHETA ON OF	
	Jaime Girald		·· ·	S. S.	•
	Name		-	POC	
	152 W. Granada Blvd.	-	မ္မာ	RAS	
	Florida street address (P.O. Box NOT acceptable)		38	TICHS	
	Ormond Beach FL 32174		-	3	- · ·
	City, State and Zip				

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.

(Signature of a member of authorized representative of a member)

Jaime Girald

(Printed or typed name of signee)

nature of Registered Agent)

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.

(constant Agent) Jaime Girald Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00