# 103000043238

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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2011 FEB 22 PH 12: 53

J. SAULSBERRY EXAMINER FEB 2 3 2011

## **COVER LETTER**

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SUBJECT:		amin Leg			C.				
Dear Sir or Madam:									
The enclosed Registered Ag	ent/Registere	ed Office C	hange and	fee(s) are	submit	tted for	filing.		
Please return all corresponde	ence concern	ing this ma	tter to the	following	•				324 <b>5</b> 3
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Istauffer	@nrai.com	· · · .	*		with the	-	>>	ယ	
E-mail address: (to be used for	future annual rep	ort notification	)						
For further information conc	erning this n	natter, pleas	se call:						
Linda Stauff	er	at (	800 )		862-	5438			
Name of Person				Code & Dayt			ımber		
STREET/COURIER  Consider Division of Corporatio  Consider Clifton Building  Consider Clifton Building  Consider Courier  Consider Courier  Tallahassee, Florida 32	ns Circle		Registra Division P.O. Bo	NG ADDR tion Section of Corpora 6327 see, Florida	n ations			t in Agamaka	
Enclosed is a check	for the follo	wing amou	ınt:						·
\$25 Filing Fee		- 1		ling Fee &	z Certif	ied Co	nv		

## 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. Name of the limited liability company:	Benjamin Legal Services, P.L.C.
2. (a) Principal office address of limited liability co	empany:
(Note: MUST BE STREET ADDRESS)	. ,
(Mic. Mest be STREET MORESS)	
(b) Mailing address of limited liability company:	7350 S. Tamiami Trail
(Note: MAY BE POST OFFICE BOX)	#62
	Sarasota, Florida 34231
11/07/2003	L03000043238
3. Date of filing/registration in Florida	4. Document number
25 (a) Registered Agent and Registered Office show	wn on the records of the Florida Dept. of State:
Registered Agent:	J. Kevin Benjamin, Esa.
	433 Plaza Real, Suite 275
Registered Office Address:	Boca Raton, FL 33432
(b)-Enter name of NEW Registered Agent and/o	or NEW Registered Office address:
NEW Registered Agent:	NRAI Services, Inc.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS	515 East Park Avenue
	Tallahasse ,FL32301
J. Kevin Benjamin, Managing Member Printed or typed name of signee	the Florida street address of the registered office e identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote so therwise provided in the articles of organization impany.  Althorates Provided in the articles of organization in the articles of
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to and I am familiar-with and accept the obligations of and resolvent the complete address. I hereby confirm that the limited liability confirm the limited liability confirm that the limited liability confirm the limited liability confirm the limited liability confirm the limited liability liability confirm the limited liability confirm the liability	the proper and complete performance of my duties, my position as registered agent as provided for in to merely reflect a change in the registered office impany has been notified in writing of this change.
Signature of Registered Agent Ling Stauffer, Asst. Secy.	

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

### **COVER LETTER**

Division of Corporations					
	nin Legal				
Name of	Limited Lia	bility Comp	bany		
Dear Sir or Madam:					
The enclosed Registered Agent/Registered	Office Chan	ge and fee(	s) are submitted fo	or filing.	
Please return all correspondence concerning	g this matter	to the follo	wing:		
				٠.	
Linda Stauffer					
Name of Person					
<u>.</u>		•			
NRAI Corporate Services			-		•
Firm/Company					
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Houston, Texas 77062					
City/State and Zip Code		<del></del>		2 PM 12: 53 Y OF STATE SEE, FLORIDA	The same of
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Istauffer@nrai.com E-mail address: (to be used for future annual report r	notification)	<del></del>			
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For further information concerning this matt	ter, please ca	ll:			
_	-				
Linda Chauffau			000 5400		
Linda Stauffer	_ at ( <u>800</u>		862-5438		
Name of Person		Area Code &	Daytime Telephone N	umber	
EASTREET/COURIER ADDRESS;	M	AILING A	DDRESS:		
Registration Section		egistration S		•	
Program Division of Corporations	D	ivision of Co	orporations		
Caraca Clifton Building	- P.	O. Box 6327			
266l Executive Center Circle	Ta	illahassee, F	lorida 32314	•	**
Tallahassee, Florida 32301	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	r samman ja je t Seleka i serem
Enclosed is a check for the following	ng amount:			· <u>·</u> ·	THE SHAPE OF BUILDING
\$25 Filing Fee	<u></u> \$	55 Filing F	ee & Certified Co	рру	

### , . . . 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.

Name of the limited liability company:	Benjamin Legal Services, P.L.C.				
2. (a) Principal office address of limited liability com	npany:				
(Note: MUST BE STREET ADDRESS)					
(b) Mailing address of limited liability company:	7350 S. Tamiami Trail				
(Note: MAY BE POST OFFICE BOX)	#62 Sarasota, Florida 34231				
11/07/2003 3. Date of filing/registration in Florida	L03000043238 4. Document number	· · · · · · · · · · · · · · · · · · ·			
Registered Agent and Registered Office shown	J. Kevin Benjamin, Esq.				
Registered Office Address:	433 Plaza Real, Suite 275 OF Society States Boca Raton, FL 33432				
(b) Enter name of <b>NEW Registered Agent</b> and/or	NEW Registered Office address: NEW Registered Office address:				
NEW Registered Agent:	NRAI Services, Inc.	NRAI Services, Inc.			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	515 East Park Avenue				
•	Tallahasse ,FL32301				
If the limited liability company is not organized under confirmed that after the change or changes are made, it and the business office of the registered agent will be is liability company, it is hereby confirmed that the chang of the members of the limited liability company or as or the operating agreement of the limited liability company or the operating agreement of the limited liability company.	the Florida street address of the registered office identical. Or, in the case of a Florida limited ige(s) was/were authorized by an affirmative vot otherwise provided in the articles of organization apany.	e			
Signature of a member or authorized representative of a member 2-1	71 ~ 2011 				
J. Kevin Benjamin, Managing Member Printed or typed name of signee		-			
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, E.S. Or, if this document is being filed to address it hereby confirm that the limited liability composition of Registered Agent Lings Stauffer, Asst. Secy.	nd agree to act in this capacity. I further agree e proper and complete performance of my dutie y position as registered agent as provided for in o merely reflect a change in the registered office pany has been notified in writing of this change	to s, 1			

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