C0400018804

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
	•	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
,		

Office Use Only



300116205203

01/28/08--01048--006 **25.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

A COLUMN TO THE PARTY OF THE PA

T. CLINE

JAN 29 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: HR Guild LL (Name of Limited Lie	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Rahim Tajalli (Name of Person) HR Guild LLC (Firm/Company) 3740 N.W. 124th Ave- (Address) Coral Springs, FL 33065 (City/State and Zip Code)	2000 JAN 28 SECRETARY TALLAHASS
For further information concerning this matter, please of	The state of the s
Rahim Tajalli at (950) (Name of Person)	(Area Code & Daytime Telephone Number)
Registration Section II Division of Corporations II Clifton Building II	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, Florida 32314
Enclosed is a check for the following amount:	:
✓\$25 Filing Fee	\$55 Filing Fee & Certified Copy

INHS18 (8/05)

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.

agent, or both, in the state of Florida.
1. The name of the limited liability company is: HR Guild LLC
2. The mailing address of the limited liability company is: 3740 N.W. 124 th Ave.
March 10, 2004 3. Date of filing/registration in Florida Loyooo18804 4. Document number
5. 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: An B. Ohn
6. The name and address of the new registered agent and/or office:
Rahim Tajalli 3740 N.W. 124th Ave.
Florida street address (P.O. Box NOT acceptable)
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.
Printed or typed name of signet)
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 filled to merely reflect a change in the registered office address. Thereby confirm that the lightlift company has been notified in writing of this change.

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

(Signature of Registered Agent)