

L 040000 24604

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300065841603

02/16/06--01022--009 **35.00

2/23/08/01

FILED
06 MAR -8 PM 4:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4p

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ONTAP CONSULTING, LLC
(Name of Corporation)

DOCUMENT NUMBER: L04000024604

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joel Remigio
(Name of Contact Person)

ONTAP CONSULTING, LLC
(Firm/Company)

1021 E LIVINGSTON STREET
(Address)

ORLANDO, FL 32803
(City/State and Zip Code)

FILED
06 MAR -8 PM 4:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Joel Remigio at (407) 718-9948
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 24, 2006

JOEL REMIGIO
ONTAP CONSULTING LLC
1021 E LIVINGSTON STREET
ORLANDO, FL 32803

SUBJECT: ONTAP CONSULTING LLC
Ref. Number: L04000024604

We have received your document for ONTAP CONSULTING 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):

The form you submitted is for a corporation, but your entity is an LLC. Enclosed is the proper form for your LLC.

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: 206A000133

FILED
06 MAR -8 PM 4:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: ONTAP CONSULTING, LLC
2. The mailing address of the limited liability company is: 1021 E. LIVINGSTON STREET ORLANDO, FL 32803
3. Date of filing/registration in Florida 4/2/2004
4. Document number L04000024604

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

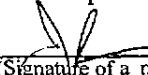
JOEL REMIGIO
Name
3040 ALOMA AVENUE, #L3
Address
WINTER PARK FL 32772
City, State and Zip

6. The name and address of the new registered agent and/or office:

JOEL REMIGIO
Name
1021 E. LIVINGSTON STREET
Florida street address (P.O. Box NOT acceptable)
ORLANDO, FL 32803
City, State and Zip

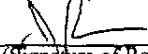
FILED
06 MAR -8 PM 4:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 or authorized representative of a member)

JOEL REMIGIO 3/2/2006
(Printed or typed name of signee)

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.


(Signature of Registered Agent)

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