L04000046594

(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				
L. SELLERS AUG 5 2010				
EXAMINER				

Office Use Only



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07/23/10--01023--009 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TILEU

National Registered Agents, Inc. 11600 College Boulevard Suite 210 Overland Park, KS 66210 800.550.6724 Fax 913.851.0713

July 22, 2010

Secretary of State Florida Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Florida Gulf Tax Advisors, LLC

Dear Sir/Madam:

For the purposes of changing the registered office and/or registered agent of the above captioned, Florida Gulf Tax Advisors, LLC, enclosed herewith, in duplicate, is a Statement of Change of Registered Office and/or Registered Agent or Both for Corporations accompanied by our check in the amount of Amount of \$25.00.

Please proceed with the filing of the enclosed, returning official receipts and evidence in the enclosed envelope.

Thank you in advance for your cooperation in this matter.

Cordially,

Voling Divell

Enclosure - Check

COVER LETTER

. ;		, 			
UBJ	JBJECT: Florida Gulf Tax Advisors, LLC Name of Limited Liability Company				
1	Haine of		I Liaomty Con	ipany	
car S	Sir or Madam:				
ho e	nclosed Registered Agent/Registered	Office	Thance and fee	(a) are submitted for filing	
ne éi	iciosen Kegisteren Agent Kegisteren	OTHER	Change and lee	(a) are submitted for fitting	
casc	return all correspondence concernin	g this m	atter to the foll	owing:	
;	Daul Cirola le				
<u> </u>	Paul Sipala, Jr. Name of Person				
. :	Florida Gulf Tax Advisors, I	<u>LC</u>			
	Firm/Company				
	1342 Colonial Bivd., Suite 0	<u>-17</u>	· 		
:	Address			·	
:					
:	Fort Myers, FL 33907				
. ;	City/State and Zip Code			•	
1	PSIPALA@AOL.COM				
E	mail address: (to be used for future annual repor	t notificatio	on)		
	rther information concerning this ma	tter nle	nne coll:		
)î ta	inter intormation concerning this ma	rrer, bre	use can.		
	Xonda Diven	-4.6	800)	550-6724	
i	Name of Person	at (_		& Daytime Telephone Number	
		•	MARY PAC	ADDRESS.	
	STREET/COURIER ADDRESS: Registration Section		MAILING ADDRESS: Registration Section		
,	Division of Corporations				
	Clifton Building				
	2661 Executive Center Circle			, Florida 32314	
	Tallahassee, Florida 32301		- 41141143000	, = =44.1400 4.44 4 1 ,	
	<u>;</u>			•	
	Enclosed is a check for the follow	ing amo	unt:	·	

110 (0.01 0107/70/9



July 26, 2010

XONDA DIVEN 11600 COLLEGE BLVD., STE. 210 OVERLAND PARK, KS 66210

SUBJECT: FLORIDA GULF TAX ADVISORS, LLC

Ref. Number: L04000046524

We have received your document for FLORIDA GULF TAX ADVISORS, LLC and your check(s) totaling \$25.00. 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 a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6967.

Letter Number: 210A00018001

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

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. N	ame of the limited liability company:Flo	orida Gulf Tax Advisors LLC		
2. (a)	Principal office address of limited liability company	r: 1342 Colonial Blvd., Suite C-17		
-12	(Note: MUST BE STREET ADDRESS)	Fort Myers, FL 33907		
<u>С</u> ф)	Mailing address of limited liability company:			
	(Note: MAY BE POST OFFICE BOX)			
	6/21/2004	L04000046524		
3. Da	te of filing/registration in Florida	4. Document number		
5. (a	Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:		
	Registered Agent:	Corporation Service Company		
:	Registered Office Address:	1201 Hays Street		
		Tallahassee, FL 32301		
(Ь)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> <u>NEW</u> Registered Agent:	V Registered Office address: NRAI Services, Inc.		
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2731 Executive Park Drive, Suite 4		
	1300000	Weston ,FL33331		
confir and th	limited liability company is not organized under the lead that after the change or changes are made, the Flee business office of the registered agent will be identify company, it is hereby confirmed that the change(s) members of the limited liability company or as other operating agreement of the limited liability company.	orida street address of the registered office		
Signatur	e of a member or assistivized representative of a member	ASS.		
PAUL	SIPALA DR.			
	or typed name of signee	- For the second		
I here compli and I a Chapta addres NRAI	by accept the appointment as registered agent and as with the provisions of all statutes relative to the provisions and accept the obligations of my poster 608, F.S. Or, if this document is being filed to mer in the limited liability company Services, Inc.	gree to act in this capacity. Philiper agree to per and complete performance of my duties, it on as provided for in either agree of a provided for in ely reflect a change in the registered office has been notified in writing of this change.		

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

INHS18 (05/08)