

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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 Address.			

LLC REGISTERED AGENT CHANGE SOLID RESOURCES, LLC

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Corporate Filing Menu

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MAY 1 5 2013

T. HAMPTON

5/14/2013

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 60 liability company submits the following statement in a agent, or both, in the State of Florida.	8.508. Florida Statutes. the undersigned limited rder to change its registered office or registered
1. Name of the limited liability company: Solid Resource	s, LLC
2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	Fort Lauderdale, FL 33316
(b) Malling address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
9/30/2004	L04000071345
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:
Registered Agent:	NRA) SERVICES, INC.
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	EW Registered Office address: CT Corporation System
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1200 South Pine Island Road
[MODI BU A BOX LOTT BINCHE TO BELLESS]	Plontation ,FL 33324
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be id liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company Keith R. Forter Signature of a member or authorized representative of a member	e Florida street address of the registered office entical. Or, in the case of a Florida limited by asswere authorized by an affirmative vote of wise provided in the articles of organization or
Keith Forster 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, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp By: CT Corporation System Signature of Registered Agent Vicinity of Registered Agent	d agree to yet in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in herely reflect a change in the registered office any has been notified in writing of this change. Marc St., Plette Re President and Assistant Secretary
Division of Corporations, P.O. Box	6327, Tallahassee, FL 32314
FILING FEE	: \$25.00 —

INHS18 (05/08)

SECRETARY OF STATE BIVISION OF CORPORATIONS