## 1040000 78791

| (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: |
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Office Use Only



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02/27/09--01025--016 \*\*35.00

SECHETARY OF STATE

M. THOMAS

MAR - 2 2009

**EXAMINER** 

## **VIA US REGULAR MAIL**

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

> Re: CHARTER WARRANTY SERVICES OF FLORIDA LLC

Dear Sir or Madam:

On behalf of the above-referenced entity, enclosed please find the following for filing with the Florida Secretary of State:

- 1 One original (1) and one (1) copy of Change of Registered Agent/Address form;
- 2 \$35.00 to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (512) 480-9131.

Respectfully,

REGISTERED AGENT, SOLUTIONS, INC.

Leana Guzman

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

| company submits the following statement in in the State of Florida.  | 16 or 608,308, Florida Statutes, the undersigned limited liability order to change its registered office or registered agent, or both,   |
|--|--|
| 1. Name of the limited liability company: C  | Charter Warranty Services Of Florida, LLC  |
| <ol> <li>(a) Principal office address of limited list<br/>(Note: MUST BE STREET ADDR)</li> </ol>   | pility company: 37686 Enterprise Court  SS) Farmington Hills, Mt 48331   |
| (b) Mailing address of limited liability co  | mpany: PO Box 2425  Farminaton, MI 49333   |
| 12/22/2005   | <u>L04000078791</u>  |
| 3. Date of filing/registration in Florida  | 4. Document number   |
|  | ice shown on the records of the Florida Dept. of State:  |
| Registered Agent:  | C T Corporation  |
| Registered Office Address:   | 1200 S Pine Island Road Plantation, FL 33324   |
|  | ≥ co   |
| NEW Registered Agent:  | nt and/or NEW Registered Office address:  Registered Agent Solutions, Inc.   |
| NEW Registered Office Address:  (MUST BE FLORIDA STREET ADDRESS)   | 155 Office Plaza Dr.   |
|  | DRESS) Suite A FL 32301 257  |
| that after the change or changes are made, the<br>office of the registered agent will be identical<br>hereby confirmed that the change(s) was/wer  | ed under the laws of the State of Florida, it is hereby comfirmed a Florida street address of the registered office and the business. Or, in the case of a Florida limited liability company, it is a authorized by an affirmative vote of the members of the limited the articles of organization or the operating agreement of the most. |
| Paul Pawlusiak (Primed or typed name of signee)  | _ <del></del>  |
| I hereby accept the appointment as registere, comply with the provisions of all statutes relain familiar with and accept the obligations of S.S. Or, if this document is being filed to met confirm that the limited liability company has (Signature of Registered Agent) | d agent and agree to act in this capacity. I further agree to tive to the proper and complete performance of my duties, and I fav position as registered agent as provided for in Chapter 608, ely reflect a change in the registered office address, I hereby been notified in writing of this change.                                    |
|  |  |

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