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ACCOUNT NO. : 07210000032	. <u>.</u>
REFERENCE : 588645 5014227	
AUTHORIZATION : Patucia Pyjut	
COST LIMIT : \$ 25.00	-4
ORDER DATE : September 9, 2005	
ORDER DATE : September 9, 2005 ORDER TIME : 3:08 PM	· · ·
ORDER NO. : 588645-005	та тако. - тако.
CUSTOMER NO: 5014227	
CUSTOMER: Ms. Starr Crowley Becker & Poliakoff, P.a. 3111 Stirling Road	Y
Fort Lauderdale, FL 33312	، ،
<u>CHANGE OF AGENT</u>	· · ·

NAME: 365 BILLING, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap -- EXT# 2951

EXAMINER:

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: 365 Billing, LLC

2. The mailing address of the limited liability company is : 350 Jim Moran Blvd., Suite 101,

Deerfield Beach, Florida 33442

June 23, 2005

3. Date of filing/registration in Florida

L05000062698

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:

> David Peterson Name

350 Jim Moran Blvd. Address Deerfield Beach, Florida 33442 City, State and Zip

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

Mark Smith

Name

301 NE 1st Street

Florida street address (P.O. Box NOT acceptable) **Deiray Beach** 33483

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby on the limited hability 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)

Mark Smith (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 508, F.S. Or. If this document is being filed to merely reflect a change in the registered office address, 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**

INHS18 (8/05)