

DOCUMENT# L05000084639

Entity Name: B.E.M. PROFESSIONAL SERVICE L.L.C

New Principal Place of Business:**Current Mailing Address:****New Mailing Address:**

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

METCALF, BRIAN E
6070 STRICKLAND PLACE
PENSACOLA, FL 32506 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date _____

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: METCALF, BRIAN E
Address: 6070 STRICKLAND PLACE
City-St-Zip: PENSACOLA, FL 32506

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRIAN E METCALF

MGR

03/15/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date