

L05000119674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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JB



200 West Adams Street, Suite 2007
Chicago, IL 60606
(312) 346-3606 (800) 934-2556
Fax: (312) 346-3607

November 1, 2007

VIA REGULAR MAIL

Division Of Corporations
Florida Department Of State
409 E. Gaines Street
Tallahassee, FL 32399

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 NOV - 6 PM 12:00

RE: Change of Agent for 32 companies
See attached chart

Dear Sir or Madam:

Enclosed please find one original and one photocopy of the forms to change the registered agent/office for the above captioned in your state. Also enclosed is a check for the required fee.

Please file with your office and return evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read "Tony Alexander", is written over the printed name.

Tony Alexander

TA/smc.
Encl.

Company Name

Service Baltimore, LLC
Service Birmingham, LLC
Service Central FL, LLC
Service Columbia, LLC
Service DC, LLC
Service Denver, LLC
Service FCS, LLC
Service Florida, LLC
Service Fresno, LLC
Service Gainesville, LLC
Service Gold Coast, LLC
Service Greenville, LLC
Service Houston, LLC
Service Indianapolis, LLC
Service Las Vegas, LLC
Service Memphis, LLC
Service Nashville, LLC
Service New Orleans, LLC
Service North, LLC
Service North- Central, LLC
Service Oklahoma City, LLC
Service Philadelphia, LLC
Service Phoenix, LLC
Service Salt Lake City, LLC
Service Seattle, LLC
Service South, LLC
Service St. Louis, LLC
Service Tallahassee, LLC
Service Tampa, LLC
Service Tri- Cities, LLC
Service Virginia, LLC
Service West Coast, LLC

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**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: Service Baltimore, LLC

2. The mailing address of the limited liability company is : _____

401 E. Las Olas Blvd., Suite 1220, Fort Lauderdale, FL 33301

12/15/2005

L050000119674

3. Date of filing/registration in Florida

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:

Thomas C. Byrne

Name

401 E. Las Olas Blvd., Suite 1220

Address

Fort Lauderdale, FL 33301

City, State and Zip

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

NRAI Services, Inc.

Name

2731 Executive Park Drive, Suite 4

Florida street address (P.O. Box NOT acceptable)

Weston FL 33331

City, State and Zip

If the limited liability 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)

Thomas C. Byrne, Manager

(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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

NRAI Services, Inc.

(Signature of Registered Agent)

Anthony J. Alexander, Asst. Secretary

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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