L06000027808

(Re	equestor's Name)	<u> </u>		
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SECKETARY OF STATE ANY ISION OF CORPORATIONS

J. BRYAN APR 2 0 2007



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 20, 2007

LYNN J. EVERARD BENCHMARKING EXCELLENCE, LLC 6123 NW 45TH AVENUE COCONUT CREEK, FL 33073

SUBJECT: BENCHMARKING EXCELLENCE, LLC

Ref. Number: L06000027808

We have received your document for BENCHMARKING EXCELLENCE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 207A00026907

Joey Bryan Document Specialist OT MAY - 4 AM 11: 34

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: <u>Renchmarting Excelle</u> (Name of Limite	d Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
Lynn J. Everard (Name of Person) Benchmarking Excellence, 11 (Firm/Company) 6123 NW 45th Avenue (Address)	OT MAY -4 AM 11: 34	
Coconut Creek, FL 33073 (City/State and Zip Code)		
For further information concerning this matter, ple	ase call:	
Lynn J Everard at (at ((Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amo	ount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

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.

agent, or oom, in the blun	•	- 4	
1. The name of the limite	d liability company	is: Benchmarking Excelle	nce ILLC
2. The mailing address of	f the limited liability	company is: 6123 NW 45th	"Avenve
Coconut Creek	F, FL 33073		
		L060000	27808
3. Date of filing/registrati	ion in Florida	4. Document number	
Florida Department of S	State:	Treerporating Company Name ve Court, Suite C Address Honda 333/9 ty, State and Zip	Ð
6. The name and address of	Lynn J 6123 NW Florida street addr		SECRETARY OF STATIOHS SECRETARY OF STATIOHS OT HAY -4 AM 11: 34
confirmed that after the chand the business office of liability company, it is her	the registered agent reby confirmed that the nited liability compant of the limited liabi	ed under the laws of the State of Fleemade, the Florida street address of will be identical. Or, in the case of the change(s) was/were authorized my or as otherwise provided in the ality company.	f the registered office f a Florida limited by an affirmative vote

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.

(Signature of Registered Agent)

(Printed or typed name of signee)