L060000074519

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C. LEWS

DEC 1 1 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: <u>CAPITAL EDGE LLC</u> (Name of Lin	nited 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 n	natter to the following:			
SAM S. SINGH				
(Name of Person)				
E&S BOOKKEEPING AND TAX SERVICES				
(Firm/Company)				
1193 BEDROCK DRIVE				
(Address)	£.			
ORANGE PARK, FL 32065				
(City/State and Zip Code)				
For further information concerning this matter, ple	ease call:			
SAM S. SINGH at (904) 662-6040			
(Name of Person)	(Area Code & Daytime Telephone Number)			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy			

INHS18 (5/08)

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 N.	ame of the limited liability company:	CANTAL EDGELLO	_
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	3842 PEBBLE BROOK CIRCLE ORANGE PARK FL 32065	.
(b)	Mailing address of limited liability company: (Note: MAYBE POST OFFICE BOX)	3842 PEBBLE BROOK CIRCLE ORANGE PARK FL 32065	
	······································	L06000074519 4. Document number	
) Registered Agent and Registered Office shown on the	he records of the Florida Dent of Stat	e.
J. (a	Registered Agent:	CORPORATION SERVICE COMPANY	
	Registered Office Address:	1201 HAYS STREET TALLAHASSEE FL 32301	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:	
	NEW Registered Agent:	E&S BOOKKEEPING AND TAX SERVI	CES
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1193 BEDROCK DRIVE	
		ORANGE PARK ■,FL 320	<u> 165</u>
that a office hereb liabili limite	limited liability company is not organized under the lafter the change or changes are made, the Florida street of the registered agent will be identical. Or, in the cay confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of a liability company.	address of the registered office and the set of a Florida limited liability compay an affirmative vote of the members	ne business any, it is of the limited
<u></u>	ure of a member or authorized representative of a member) OUV () () () () () () () () () () () () ()		
	eby accept the appointment as registered agent and as ly with the provisions of all statutes relative to the pro miliar with and accept the obligations of my position Or, if this document is being filed to merely reflect a c m that the limited liability company has been notified	gree to act in this capacity. I further of per and complete performance of my as registered agent as provided for in hange in the registered office address in writing of this change.	igree to duties, and I Chapter 608, , I hereby
(Signa	tupe of Registered Agent)		
, ,	Division of Corporations, P.O. Box FILING FEE:	\$25.00	FILE BEC 10 P
INHS	18 (05/08)	•	art. ample