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COVER LETTER

_	ation Section on of Corporations			
SUBJECT: _	MADISON CONSULTING (Name of		ENTS, LLC ility Company)	
Dear Sir or Ma	dam:			
The enclosed F	Registered Agent/Registered (Office Chang	e and fee(s) are submitted for filing.	
Please return a	ll correspondence concerning	this matter t	o the following:	
TIMOTHY J.	SLOAN, ESQ. (Name of Person)		~ `	
HARMON &	SLOAN, P.A.			O7 MAY 18 PN 1: 03
	(Firm/Company)		-	MY I
427 McKENZ	E AVENUE			OT HAY 18 PM 1: 03
	(Address)		······································	ORAL
PANAMA CITY	′, FL 32401			6 3
	(City/State and Zip Code)		_	
For further info	ormation concerning this matt	er, please cal	1:	
TERRY LEE B	ROWN	at (850	265-5866	
((Name of Person)		(Area Code & Daytime Telephone	Number)
Registra: Division Clifton F 2661 Ex	T/COURIER ADDRESS: tion Section of Corporations Building ecutive Center Circle see, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclose	ed is a check for the following	ig amount:		
✓ \$25 I	Filing Fee	☐ \$:	55 Filing Fee & Certified Copy	

INHS18 (8/05)

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: MADISON CONSULTING & INVESTMENTS, LLC 2. The mailing address of the limited liability company is: 1812 MAINE AVENUE, LYNN HAVEN, FL 32444 JULY 28, 2006 L06000075046 3. Date of filing/registration in Florida 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: FLORIDA INCORPORATORS, INC. Name 8875 HIDDEN RIVER PKWY, STE 300 Address TAMPA, FL 33637 City, State and Zip 6. The name and address of the new registered agent and/or office: TIMOTHY J. SLOAN, ESQ., HARMON & SLOAN, P.A. Name **427 McKENZIE AVENUE** Florida street address (P.O. Box NOT acceptable) PANAMA CITY 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. member or authorized representative of a member)

TERRY LEE BROWN

(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.

(Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

HARMON & SLOAN, P.A.

ATTORNEYS AND COUNSELORS AT LAW
427 McKenzie Avenue
Post Office Box 2327
PANAMA CITY, FLORIDA 32402-2327

DANIEL HARMON III
TIMOTHY J. SLOAN *
*ALSO MEMBER OF
DISTRICT OF COLUMBIA
AND MISSOURI BARS

TELEPHONE (850) 769-2501 FACSIMILE (850) 769-0824

May 15, 2007

Secretary of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re: Madison Consulting & Investments, LLC

Gentlemen:

Enclosed please find the original and one copy of the Articles of Amendment to Articles of Organization of the above referenced limited liability company, together with a Statement of Change & Registered Agent and two checks in the amounts of \$25.00 each to cover the cost of filing. Please file the Amendment and Statement at your earliest convenience, and return certified copies to us.

Thank you for your assistance with this matter. If there are any questions, please do not hesitate to call collect.

Sincerely,

HARMON & SLOAN, P. A.

Timothy J. Sloan

TJS/mf Encl.

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