L06000086181

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DIVISION OF CORPORALIONS BECRETARY OF STAIC FILED

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: KELLER - GOLDSTEIN MO (Name of Limited I	•
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
(Name of Person)	
KEUER - GOUSTEIN MOBILE LI (Firm/Company)	<u>c</u>
6874 GRENELEFE RD (Address)	
BOYNTON BEACH, FL 33437 (City/State and Zip Code)	
For further information concerning this matter, please	e call:
DAVID GOLDSTEIN at (8 (Name of Person)	(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 amount	nt:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

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SECRÉTARE DE STATE TALLAHASSEE, FLORIDA

December 19, 2007

IRWIN KELLER 6874 GRENELEFE RD BOYNTON BEACH, FL 33437

SUBJECT: KELLER-GOLDSTEIN MOBILE LLC

Ref. Number: L06000086181

We have received your document for KELLER-GOLDSTEIN MOBILE 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):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 107A00070752

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: KELLER - GOLDSTEIN MOBILE L	LC	
2. The mailing address of the limited liability company is: 1765 BWE CANYON IT		·
THOUSAND CAKS, CA 91320		
9/1/2006 L06000086181		
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 Florida Department of State: CORPORATION SERVICE COMPANY Name 1201 IHAYS STREET Address TAUAHASSEE FL 32301 City, State and Zip		. е D1
6. The name and address of the new registered agent and/or office: IRWIN KELLER	8- NAL 80	SECRETARY VISION OF C
Name 6874 GRENELEFE RD Florida street address (P.O. Box NOT acceptable) BOUNTON BEACH, FL 33437 City, State and Zip	AH 10: 29	ED OF STATE ORPORATIONS
If the limited liability company is not organized under the laws of the State of Florida, it is he confirmed that after the change or changes are made, the Florida street address of the register and the business office of the registered agent will be identical. Or, in the case of a Florida li liability company, it is hereby confirmed that the change(s) was/were authorized by an affirm of the members of the limited liability company or as otherwise provided in the articles of or or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member)	ed of mited ative	fice I vote
DAVID E. GOLDSTEIN (Printed or typed name of signee)		
I hereby accept the appointment as registered agent and agree to act in this capacity. I furth comply with the provisions of all statutes relative to the proper and complete performance of and I am familiar with and accept the obligations of my position as registered agent as providing the control of this document is being filed to merely reflect a change in the register address, I hereby confirm that the limited liability company has been notified in writing of this control of the	er as my å ded fö red o s chå	ree to uties, or in ffice inge.

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