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(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·		
(Address)				
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(Cit	y/State/Zip/Phone	o #)		
		MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
A. LUNT				
JUL 27 2010				
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Official Reporting Services, LLC d/b/a Apex Reporting Group Name of Limited Liability Company

Dear Sir or Madam:

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The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Arthur Kushner Name of Person

Official Reporting Services, LLC Firm/Company

12 SE 7th Street, Suite 702

Ft. Lauderdale, FL 33301 City/State and Zip Code

arthur@apex-rg.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Arthur Kushner at (305) 444-3387 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:



\$55 Filing Fee & Certified Copy

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INHS18 (5/08)

	STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED) AGEN	IT OR
	BOTH FOR LIMITED LIABILITY COMPANY		
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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. Name of the limited liability company:	ne of the limited liability company:Official Reporting Services, LLC			
2. (a) Principal office address of limited liability comp	bany: 12 SE 7th Street, Suite 702			
(<u>Note: MUST BE STREET ADDRESS</u>)	Ft. Lauderdale, FL 33301			
(b) Mailing address of limited liability company:	12 SE 7th Street, Suite 702			
(Note: MAY BE POST OFFICE BOX)	Ft. Lauderdale, FL 33301			
11/8/2006	L06000108401			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
Registered Agent:	Arthur Kushner			
Registered Office Address:	524 S. Andrews Ave., Ste. 302N 😭 Ft. Lauderdale, FL 33301 – 🚈 🚟			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u>				
NEW Registered Agent:				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	12 SE 7th Street. Suite 702: 27			
	Ft. Lauderdale ,FL 33301			
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.				
Arthur Kushner 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

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