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T. HAMPTON SEP - 2 2008

EXAMINER

COVER LETTER

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TO: Registration Section Division of Corporations	
SUBJECT: APPRAISAL SPECIAL (Name	LTY GROUP, LLC e of Limited 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	g this matter to the following:
PAUL EMMANUEL	
(Name of Person)	
APPRAISAL SPECIALTY GROUP, LLC (Firm/Company)	
1180 GULF BLVD. # 1801 (Address)	
CLEARWATER, FLORIDA 33767	(
(City/State and Zip Code)	
For further information concerning this ma	tter, please call:
PAUL EMMANUEL	at (<u>813</u>) <u>785-5000</u>
(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	ing amount:
✓ \$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.

in the State of Floridă.	age in registered office or registered agein, or born,
1. Name of the limited liability company: APPRAISA	L SPECIALTY GROUP, LLC
2. (a) Principal office address of limited liability compan (<i>Note: MUST BE STREET ADDRESS</i>)	y: 1180 GULF BLVD. # 1801 CLEARWATER, FLORIDA 33767
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1180 GULF BLVD. # 1801 CLEARWATER, FLORIDA 33767
01/17/2007	L07000005683
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:	UNTIED STATES CORPORATIONS AGENTS INC
Registered Office Address:	13302 WINDING OAKS BLVD. SUITE A-100 TAMPA, FLORIDA 33612-3425
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:	W Registered Office address: PAUL EMMANUEL
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1180 GULF BLVD. # 1801
Mest be realizable Abbress)	CLEARWATER,FL_33767
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the charge confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	et address of the registered office and the business ase of a Florida limited liability company, it is
(Signature of a member of authorized representative of a member)	
PAUL EMMANUEL (Printed or typed name of signee)	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pramiliar with and accept the obligations of my position f.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified to the limited liability company has been notified.	E E
(Signature of Registered Agent)	SSE 29
Division of Corporations, P.O. Box FILING FEE	6327, Tallahassee, FL 32314;

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