## L07000010732

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Business Entity Name)		
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09 MAR 16 PM 3: 36

SECRETARY OF STATE

J. BRYAN

MAR 1,7 2009

EXAMINER

## COVER-LETTER

TO: Registration Section Division of Corporations			
SUBJECT: RESOURCE EXCELLLC	nited Liability Company)		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filir	ıg.	
Please return all correspondence concerning this r	matter to the following:		
EUNICE IKPEKPE  (Name of Person)  RESOURCE EXCEL LLC  (Firm/Company)  6021 CHURCHSIDE DRIVE  (Address)  LITHIA , FLORIDA; 33547  (City/State and Zip Code)  For further information concerning this matter, ple	ease call:	O9 MAR 16 PM 3: 36 SECRETARY OF STATE FALLAHASSEE, FLORIDA	
	813 ) 6819182  (Area Code & Daytime Telephone Num	nber)	
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 am	_		
	☐ \$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 Florida.	
1. Name of the limited liability company: RESOURG	CE EXCEL LLC
<ol> <li>(a) Principal office address of limited liability compa (<u>Note: MUST BE STREET ADDRESS</u>)</li> </ol>	ny: 6021 CHURCHSIDE DRIVE  LITHIA , FLORIDA, 33547
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	6021 CHURCHSIDE DRIVE LITHIA, FLORIDA 33547
01/30/2007	LO7000010732
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown o	on the records of the Florida Dept. of State:
Registered Agent:	CORPORATION SERVICE COMPANY
Registered Office Address:	1201 HAYS STREET TALLAHASSEE, 32301
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	EW Registered Office address:  RESOURCE EXCEL LLC
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	6021 CHURCHSIDE DRIVE デックリング LITHIA RF 公 33547 FL 日間
If the limited liability company is not organized under the that after the change or changes are made, the Florida structure of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.  (Signature of a member or authorized representative of a member)  EUNICE IKPEKPE (Printed or typed name of signee)  I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the part familiar with and accept the obligations of my position of the provision of the provision of all statutes relative to the part familiar with and accept the obligations of my position of the provision of the provision of all statutes relative to the part familiar with and accept the obligations of my position of the provision of the provision of all statutes relative to the part familiar with and accept the obligations of my position of the provision of the provisi	eet address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited of organization or the operating agreement of the

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

(Signature of Registered Agent)