## L07000075962

(Requestor's Name)				
(Address)				
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## **COVER LETTER**

10:	Division of Corporations				
SUBJE	ECT:Blackhawk Training Co	enter, LLC			
	Name of Limited Liability Company				
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.			
Please	return all correspondence concerning	this matter to the following:			
Denn	nis Hugdahl				
	Name of Person				
FACS	S Inc				
	Firm/Company				
10452	? Taft St				
	Address	<del></del>			
Pembr	rook Pines, FL 33026				
	City/State and Zip Code	<del>,</del>			
fac	cs10452@hotmail.com				
E-r	mail address: (to be used for future annual report	notification)			
For fur	rther information concerning this mate	ter, please call:			
Denni	is Hugdahl	_at ()			
	Name of Person	Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS:	MAILING ADDRESS:			
	Registration Section	Registration Section			
	Division of Corporations	Division of Corporations			
	Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314			
	Tallahassee, Florida 32301	Tananassee, Florida 32314			
	Enclosed is a check for the followi	ng 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.

Blackbank Training Center, LLC

1.	Nar	ne of the limited liability company:	
2.	(a)	Principal office address of limited liability company	: 10452 Taft Street
		(Note: MUST BE STREET ADDRESS)	Pembrook Pines, FL 33026
(	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SAME
		(NOIE: MAT BE FOST OFFICE BOX)	
		-7/24/2007 e of filing/registration in Florida	_L_07000075962
3.	Dat	e of filing/registration in Florida	4. Document number
5.	5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
		Registered Agent:	-Corporation Company of Orlando
		Registered Office Address:	300 South Orange Ave., Suite 1000
			Orlando, FL 32801-5403
		NEW Registered Office Address:	-Dennis Hugdahl
		NEW Registered Office Address:	10452 Taft St
		(MUST BE FLORIDA STREET ADDRESS)	Pembrook Pines ,FL 33026
1 <i>f</i> + k	. a 18	imited liability comments in act annual and an death of	
con and liab the	tirn the ility me	imited liability company is not organized under the laned that after the change or changes are made, the Flebusiness office of the registered agent will be identify company, it is hereby confirmed that the change(s) mbers of the limited liability company or as otherwise trating agreement of the limited liability company.	orida street address of the registered office
Signa	ature	of a member or authorized representative of a member	-
Ü		4.4	
Prin	ted o	MART IN Gaye-5Ki pr typed name of signee	
		- · · · · · · · · · · · · · · · · · · ·	······································
com and Cha add	ply I a Ipte res:	by accept the appointment as registered agent and ag with the provisions of all statutes relative to the pro m familiar with and accept the obligations of my pos r 608, F.S. Or, if this document is being filed to mer s, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
Sign	atur	e of Registered Agent	

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