L07000105212

_____
(Requestor's Name)

_____
(Address)

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(Address)

_____
(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

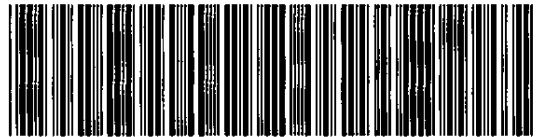Certified Copies _____   Certificates of Status _____

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OCT - 1 2009

EXAMINER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
09 SEP 30 AM 11: 08

COVER LETTER

TO: Registration Section
          Division of Corporations

SUBJECT: _____ **BUCCANEER SOLUTIONS GROUP, LLC** _____
<div align="center">Name of Limited Liability Company</div>

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

_____ **Edward A. Dowgwillo, Managing Member** _____
<div align="center">Name of Person</div>

_____ **BUCCANEER SOLUTIONS GROUP, LLC** _____
<div align="center">Firm/Company</div>

_____ **6547 BELLINGHAM STREET** _____
<div align="center">Address</div>

_____ **NAVARRE FL 32566** _____
<div align="center">City/State and Zip Code</div>

_____ **bsg.llc@hotmail.com** _____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

_____ **Edward A. Dowgwillo** _____ at (__850__) _____ **939-7093** _____
<div align="center">Name of Person   Area Code & Daytime Telephone Number</div>

STREET/COURIER ADDRESS: **MAILING ADDRESS:**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
Clifton Building   P.O. Box 6327
2661 Executive Center Circle   Tallahassee, Florida 32314
Tallahassee, Florida 32301

Enclosed is a check for the following amount:

☑ $25 Filing Fee   ☐ $55 Filing Fee & Certified Copy

INHS18 (5/08)

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. Name of the limited liability company: __BUCCANEER SOLUTIONS GROUP, LLC__

2. (a) Principal office address of limited liability company: _____

   [✓]

   (*Note: MUST BE STREET ADDRESS*)   6547 BELLINGHAM STREET
   NAVARRE FL 32566

   (b) Mailing address of limited liability company: _____

   [✓]

   (Note: MAY BE POST OFFICE BOX)   6547 BELLINGHAM STREET
   NAVARRE FL 32566

   _____10/17/1007_____   _____L07000105212_____
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: United States Corporation Agents, Inc.

   Registered Office Address: 13302 Winding Oaks Blvd
   Suite A-100
   Tampa FL 33612-3425 USA

   (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

   NEW Registered Agent: EDWARD A. DOWGWILLO

   NEW Registered Office Address: 6547 BELLINGHAM STREET
   (MUST BE FLORIDA STREET ADDRESS)
   NAVARRE   ,FL 32566

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.

_____
Signature of a member or authorized representative of a member

_____EDWARD A. DOWGWILLO_____
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

INHS18 (05/08)