

(Requestor's Name)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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M. THOMAS

JAN 2 6 2009

EXAMINER

TO: Registration Section Division of Corporations		
i +4	•	
SUBJECT: Kelley Consulting and Real E (Name of Limit	state Services, L.L.C. ited Liability Company)	_ 0
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office (Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this ma	_	
ricase teturi an correspondence concerning this ma	after to the following.	
Robert P. Brennan		
(Name of Person)		
		09 JAN 23 AM III : 11
Kelley Consulting and Real Estate Services, L.L.C.		是等
(Firm/Company)		323
7341 S.W. 6 Street (Address)		
(Address)		23 MII: 11
5 1		3m
Plantation, Fl. 33317 (City/State and Zip Code)		
(Chyrotate and Zip Code)		
For firsther information and its at the		
For further information concerning this matter, plea	ase can:	
Dahad D. Darana	05/ 70/005/	
	954 791-9971 (Area Code & Daytime Telephone Number)	-
(Ivame 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	ranalassee, Florida 52514	
Enclosed is a check for the following amo	unt:	
✓ \$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 l	limited liability company: Kelley Co	nsulting and Real Estate Service	es, L.L.C.
2. (a) Principal (<i>Note: M</i>	office address of limited liability compa	Plantation, Fl. 33317	
	nddress of limited liability company: MAY BE POST OFFICE BOX	7341 S.W. 6 Street Plantation, Fl. 33317	
01/03/2008		L08000000814	
3. Date of filing	/registration in Florida	4. Document number	
5. (a) Registere	ed Agent and Registered Office shown of	on the records of the Florida Dept. of Stat	e:
Registere	ed Agent:	Speigel & Utrera, P.A.	 3
Registere	ed Office Address:	1840 S.W. 22ND Street 4TH Floor Miami, Fl. 33145	JAN 23
• •	ne of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address: Robert G. Brennan	AH II: 11
	egistered Office Address: BE FLORIDA STREET ADDRESS)	1201 Manor Court Weston ,FL 333	
that after the cha office of the regi hereby confirme liability compan- limited liability	ange or changes are made, the Florida stricted agent will be identical. Or, in the d that the change(s) was/were authorize y or as otherwise provided in the article	ne laws of the State of Florida, it is hereby reet address of the registered office and the e case of a Florida limited liability compart d by an affirmative vote of the members of s of organization or the operating agreem	y confirmed
Robert P. Brennar (Printed or typed name	ne of signee)	<u> </u>	
I hereby accept comply with the am familiar with F.S. Or, if this a confirm that the	the appointment as registered agent an provisions of all statutes relative to the i and accept the obligations of my positi locument is being filed to merely reflect limited liability company has been notij	d agree to act in this capacity. I further of proper and complete performance of my on as registered agent as provided for in a change in the registered office address fied in writing of this change.	agree to duties, and I Chapter 608, s, I hereby

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

(Signature of Registered Agent)