## 

(Requestor's Name)  (Address)	700119011087	
(Address)	Art 1	-
(City/State/Zip/Phone #)		·
PICK-UP WAIT MAIL	03/04/0801004009	**55.00
(Business Entity Name)	·	
(Document Number)	7	
Certified Copies Certificates of Status	2000 MAR -3 SECRETARY L LLAHASSEE,	71
Special Instructions to Filing Officer:	P 4: Flori	
A. LUNT	25 DA	
MAR - 5 2000		
MAR - 5 2008  EXAMINER	5	
Office Use Only	1	

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Florida Radiolog (Name of Limited)	Liability Company)		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing.		
Please return all correspondence concerning this ma	tter to the following:		
Ricando butiennes (Name of Person)	2000 TALL		
The Friendly Companies-			
15798 SW 74 <sup>f</sup> 57	P 4: 25 F STATE FLORIDA		
Miam' F/ 33193 (City/State and Zip Code)			
For further information concerning this matter, please call:			
(Name of Person) at (	(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 amount:			
☐\$25 Filing Fee	S55 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.

1. The name of the limited liability company is: Flonida Radio logy Consultants. Co		
2. The mailing address of the limited liability company is: 15798 5W 7474 5T.		
MIAMÍ F/ 33193		
62/05/2008 L08000012980		
3. Date of filing/registration in Florida 4. Document number		
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:    Lopez   Florida		
6. The name and address of the new registered agent and/or office:  The Friendly Companies Two. =  Name  15798 5W 7444 5T  Florida street address (P.O. Box NOT acceptable)  Minmi FL 33193  City, State and Zip		
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)  Ricando Sufferne 7  (Printed or typed name of signee)  Liberaby accept the appointment as registered agent and agree to act in this canacity. I further agree to		
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)		
Picando Gutienne. Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00		