## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

Prom;

Account Name : AGENTS AND CORPORATIONS, INC

Account, Number : I20010000112 Phone : (302)575-0875 : (302)575-1642 Fax Number

\*\*Enter the emoil address for this business entity to be used for third annual report mailings. Enter only one email address please

HAR

## LLC REGISTERED AGENT CHANGE LPS GROUP, LLC

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Electronic Filing Menu Corporate Filing Menu

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## H13000054747 3

## 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: LPS GROUP, LLC	
2. (a) Principal office address of limited liability comp. (Note: MUST BE STREET ADDRESS)	any: 150 CAPPS LANE
	EATONTON, OA 310.
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	150 CAPPS LANE
	EATONTON, CA.3102
APRIL 1, 2005	108000033171
3. Date of filling/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	
Registered Agent:	SIONEY J HARCEN, JR
Registered Office Address:	4839 GUMMFLL ROAD CO
(b) Enter name of NEW Registered Agent and/or N	EW Registered Uttice address: " 1.
NEW Registered Agent:	AGENTS AND CORPORATIONS, INC
NEW Registered Office Address;	300 FIFTH AVENUE GOUTH SUITE 101-330
(MUST BE FLORIDA STREET ADDRESS)	
	NAPLES ,FL 34102
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idealiability company, it is hereby confirmed that the changed the members of the limited hability company or as otherwise operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	Florida street address of the registered office ntical. Or, in the case of a Florida lunited (s) was/were authorized by an affirmative vote of wise provided in the articles of organization or
Printed or typed name disignee	<u>2</u> K.
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pi and I am familiar with and accept the obligations of my pi Chapter 608, F.S. Or, if this accument is being filed to maddress, thereby confirm that the limited liability comparing the first file of the safe of the	agree to act in this capacity. I further agree to roper and complete performance of my duties, nosition as registered agent as provided for inserely reflect a change in the registered office my has been notified in writing of this change.
Division of Corporations, P.Q. Box 6.	327, Tailahassee, FL 32314
FILING FEE: S	

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