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PICK-UP	WAIT	MAIL	
(Business Entity Name)			
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Special Instructions to Filing Officer:

L. SELLERS

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**EXAMINER** 

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SECRETARY OF STATE
TALL AHASSEF, FLORID

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## **COVER LETTER**

	gistration Section vision of Corporations	
SUBJECT	T: KEYS LEGAL NURSE Name of Limit	Cousulting LLC ed Liability Company
Dear Sir o	r Madam:	
The enclos	sed Registered Agent/Registered Office	c Change and fee(s) are submitted for filing.
Please retu	urn all correspondence concerning this	matter to the following:
	RITA L OTIS  Name of Person	<del></del>
K	EYS LEGAL NURSE Com	CONSULTING, LIC
	9666 CANAL DRIVE Address	
Su	City/State and Zip Code	<i>4</i> એ
Key E-mail	's legal nursu @ Yahoo. com address: (to be used for future annual report notifica	tion)
For further	r information concerning this matter, pl	lease call:
$-\mathcal{P}_i$	Ha L. Ohis at (	305 ) 896-0500 Area Code & Daytime Telephone Number
Re Div Cli 266	REET/COURIER ADDRESS: gistration Section vision of Corporations flon Building 51 Executive Center Circle llahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
En	closed is a check for the following an	nount:
$\mathbf{X}$	\$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.

1. Name of the limited liability company: KEYS LEE	AL NURSE COUSULTING, LLC
2. (a) Principal office address of limited liability compan	y:
(Note: MUST BE STREET ADDRESS)	19666 CANAL DRIVE SUMMERLAND KEY, FL 88042
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	19666 CANAL DRIVE SUMMERIAND KEY, FL 38042
APRIL 7, 2008	408000034716
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:	CORPORATE CERATIONS INTERNATIONA
Registered Office Address:	11380 Prosperity Farms RD, # 221E PALL BEACH GAEDENS, FL 33410
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW Registered Agent</u> :	W Registered Office address: RITA L. OTIS
NEW Registered Office Address:	19666 CANAL DRIVE
(MUST BE FLORIDA STREET ADDRESS)	SUMMERCAND KEY, FL 35040
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company.	laws of the State of Florida, it is hereby Florida street address of the registered office tical. Or, in the case of a Florida limited by was/were authorized by an affirmative vote rwise provided in the articles of organization y.
Signature of a member or authorized representative of a member	- TAL
2	LAH FEB
KITA L. Ons Printed or typed name of signee	TARY ASSE
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my per Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	agree to act in this capacity. Therethere are to oper and complete performance of my dulies osition as registered agent as provided for the certific are the perfect a change in the registered office by has been notified in writing this change.