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D. BRUCE

MAR 08 2010

EXAMINER

COVER LETTER

ŢΟ:	Registration Section Division of Corporations	
SUB.	JECT:CA	TI Training Systems, LLC
	Name o	of Limited Liability Company
Dear	Sir or Madam:	
The e	nclosed Registered Agent/Registere	ed Office Change and fee(s) are submitted for filing.
Pleas	e return all correspondence concerni	ing this matter to the following:
	Tom Feeney	
	Name of Person	
_	Fowler, O'Quinn, Feeney & Sn	eed, P.A.
	Firm/Company	
	28 W. Central Blvd., Suite	· 400
	Address	10 MAR - 5 AM H: 18 ALLAHASSEE, FLORIDA on notification)
		AS.
	Orlando, Florida 3280	1
	City/State and Zip Code	
		De se
	tcf@fofslaw.com -mail address: (to be used for future annual repo	
E	-mail address: (to be used for future annual repo	ort notification)
For fu	arther information concerning this m	atter, please call:
	Tom Feeney	at (407) 425-2684
	Name of Person	Area Code & Daytime Telephone Number
	CTDEET/COUDIED ADDRECS.	MAII INO ADDDEGG
	STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: 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 follow	wing amount:
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy

TO:

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:C	ATI Training Systems, LLC			
2. (a) Principal office address of limited liability compan	y: 2603 Challenger Tech Court			
(Note: MUST BE STREET ADDRESS)	Suite 180 Orlando, Florida 32826			
(b) Mailing address of limited liability company:	2603 Challenger Tech Court			
-[√] (Note: MAY BE POST OFFICE BOX)	Suite 180 Orlando, Florida 32826			
September 15, 2008	L08000087496			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on	•			
Registered Agent:	Jeff Koltun			
Registered Office Address:	557 N. Wymore Road #100			
	Maitland, Florida 31571			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	<u> </u>			
NEW Registered Agent:	Tom Feeney			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	28 W. Central Blvd Set Suite 400			
	Orlando FL32801			
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 Repet Description of 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				
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my participated to the chapter 608 F.S. For if this document is being filed to me address, I hereby can firm that the limited liability company. Signature of Registered Agent	oper and complete perjormance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.			

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