

L08000110220

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Customer Order Instruction Cover Letter

Date: Friday, August 03, 2012

Service Requested: X Regular
 Expedited

Return to: YOUR ENTITY SOLUTION, LLC
Address: 6440 SKY POINTE DR STE 140-106
LAS VEGAS NV 89131

Phone: 702-506-0199
Contact Person: Rene' Erard

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Return Delivery: X Mail to Address Above

Order Description: ENTITY NAME: PREDICTABLE PROPERTY MGMT, LLC

1 X Original Filing of Articles of Amendment for a Florida Limited Liability Company \$ 25.00

1 X Stamped Filed copy of Articles of Amendment for a Florida Limited Liability Company No Charge

Total Amount: \$ 25.00

THANK YOU!

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: Thornton International Consulting, LLC
2. (a) Principal office address of limited liability company: Thornton International Consulting, LLC

(Note: MUST BE STREET ADDRESS)

11902 Colony Lakes Blvd
New Port Richey, FL 34654

- (b) Mailing address of limited liability company: Thornton International Consulting, LLC

(Note: MAY BE POST OFFICE BOX)

634 Westminster Reach
Smithfield, VA 23430-6272

12/01/2008

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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:

Michelle M Thornton

Registered Office Address:

634 Westminster Reach
Smithfield, VA 23430-6272

- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

NA, FL

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]
Signature of a member or authorized representative of a member

David Wayne Thornton
Printed or typed name of signee

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]
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00