

L09000008256

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

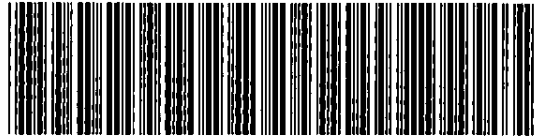
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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BLU SKYE SOLUTIONS, LLC  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GREG SCHMID, AS MGRM  
(Name of Person)

BLU SKYE SOLUTIONS, LLC  
(Firm/Company)

1223 CHESSINGTON CIRCLE  
(Address)

LAKE MARY, FL 32746  
(City/State and Zip Code)

For further information concerning this matter, please call:

GREG SCHMID at ( 407 ) 833-9210  
(Name of Person) (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

☐ \$55 Filing Fee & Certified Copy

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2009 FEB -2 PM 4:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: BLU SKYE SOLUTIONS, LLC

2. (a) Principal office address of limited liability company: 1223 CHESSINGTON CIRCLE  
**(Note: MUST BE STREET ADDRESS)** LAKE MARY, FL 32746

(b) Mailing address of limited liability company: 1223 CHESSINGTON CIRCLE  
**(Note: MAY BE POST OFFICE BOX)** LAKE MARY, FL 32746

JAN. 26, 2009

3. Date of filing/registration in Florida

L09000008256

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: THE LAW OFFICES OF NICK SPRADLIN, PLLC

Registered Office Address: 12000 NORTH DALE MABRY HWY  
SUITE 110  
TAMPA FL 33618 US

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

NEW Registered Agent: GREG SCHMID

NEW Registered Office Address: 1223 CHESSINGTON CIRCLE  
**(MUST BE FLORIDA STREET ADDRESS)** LAKE MARY, FL 32746

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.

Gregory E. Schmid, MGRM  
(Signature of a member or authorized representative of a member)

GREGORY E. SCHMID, AS MGRM

(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.*

Greg Schmid, MGRM 1-28-09  
(Signature of Registered Agent)

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