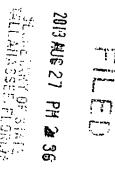
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Office Use Only



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COVER LETTER

Registration Section

Division of Corporations	
SUBJECT: DATA PROCESSING Name of Limited	G, LLC Liability Company
Dear Sir or Madam:	• • •
The enclosed Registered Agent/Registered Office Ch	
Please return all correspondence concerning this mat	ter to the following:
Nicholas Rotenberger	27 PH 23
DATA PROCESSING, LLC	Carlos Services
Firm/Company	
400 S. Dixie Hwy Suite 221	
Address	
Boca Raton, FL 33432	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please	e call:
at ()
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section
Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	rananassee, randa 52514

□ \$55 Filing Fee & Certified Copy

■ \$25 Filing Fee

Enclosed is a check for the following amount:

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. Nar	me of the limited liability company: DATA PROCESSING	пс			
2. (a)	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: 400 S. Dixie Hwy Suite 221			
		Boca Raton, FL 33432			
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	400 S. Dixie Hwy Suite 221			
	West Will But out of Thom Bott	Boca Raton, FL 33432			
03/13/200	99	113000010426	1000	020	/7/8
3. Dat	e of filing/registration in Florida	4. Document number			
5. (a)	Registered Agent and Registered Office shown on	the records of the Florie	da Dept	. of Sta	ate:
	Registered Agent:	Nicholas Rotenberger	***		
	Registered Office Address:	2255 GLADES RD SUITE 323A		013 20	
		Boca Raton, FL 33431	がた	- 22	11
			Open)	7	, , , , ,
(b)	Enter name of NEW Registered Agent and/or NE	W Registered Office a		P	
	NEW Registered Agent:	Nicholas Rotenberger	5 4	₩	
NEW Registered Office Address:	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	400 S. Dixie Hwy Suite 221		⊕	
	MOST DE L'EURIDA STREET ADDRESS	Boca Raton		.FL 33	432
confirmand the liability the me	imited liability company is not organized under the ned that after the change or changes are made, the Fe business office of the registered agent will be idenly company, it is hereby confirmed that the change(subsers of the limited liability company or as otherwesting agreement of the limited liability company.	lorida street address of tical. Or, in the case of was/were authorized b	the regi a Floric y an aff	stered la limi firmati	office ted ve vote of
Signature	e of a member or authorized representative of a member				
Printed o	Rotenberger or typed name of signee	_			
I herel comply and I a Chapte addres.	by accept the appointment as registered agent and a with the provisions of all statutes relative to the prometion of all statutes relative to the prometion of my power 608, F.S. Or, if this document is being filed to me s, I hereby confirm that the limited liability compan	agree to act in this capa oper and complete perfo sition as registered age erely reflect a change in y has been notified in w	city. If ormance on the contract of the contra	urther e of my covided istered f this c	agree to v duties, d for in d office change.

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

Signature of Registered Agent