

L09000028412

Florida Department of State
Division of Corporations
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(((H13000160164 3)))



H130001601643ABCW

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : BARNETT, BOLT, KIRKWOOD, LONG & WARRIDE
Account Number : 072731001155
Phone : (813) 253-2020
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JUL 18 2013
L. SELLE

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE
NATIONAL CONSUMER SERVICES, LLC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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**B13000160164
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: National Consumer Services, LLC

2. (a) Principal office address of limited liability company: 405 S. Dale Mabry Highway
Suite 205
Tampa, FL 33609
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 405 S. Dale Mabry Highway
Suite 205
Tampa, FL 33609
(Note: MAY BE POST OFFICE BOX)

3/23/2009

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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: Leslie J. Barnett

Registered Office Address: 601 Bayshore Boulevard
Suite 700
Tampa, FL 33606

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

NEW Registered Agent: Ben A. Barnett

NEW Registered Office Address: 405 S. Dale Mabry Highway
Suite 205
Tampa, FL 33609
(MUST BE FLORIDA STREET ADDRESS)

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

BEN BARNETT
Printed or typed name of signer

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

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