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(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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T. HAMPTON

APR 1 6 2010

EXAMINER

COVER LETTER

10.	Division of Corporations			
SUBJ	ECT: _	Cullis Real Estate Solutions, LLC		
	Name of Limited Liability Company			
Dear :	Sir or Madam:			
The e	nclosed Registered Agent/F	Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:				
	Jim Cul Name of Perso			
Cullis Real Estate Solutions, LLC Firm/Company				
3399 N. Ocean Shore Blvd.				
	Address			
Flagler Beach, FL 32136				
City/State and Zip Code				
jtcullis@yahoo.com E-mail address: (to be used for luture annual report notification)				
For further information concerning this matter, please call:				
	Im Cil	15 386 . 569 - 8823		
	Name of Person	at (384) S69-8823 Area Code & Daytime Telephone Number		
	STREET/COURIER ADD Registration Section	RESS: MAILING ADDRESS: Registration Section		
	Division of Corporations	Division of Corporations		
	Clifton Building	P.O. Box 6327		
	2661 Executive Center Circ	lc Tallahassee, Florida 32314		
	Tallahassee, Florida 32301			
	Enclosed is a check for the following amount:			
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

INHS18 (5/08)

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.

Name of the limited liability company: Cullis Real Estate Solutions, LLC				
2. (a) Principal office address of limited liability company	3399 N. Ocean Shore Blvd.			
(Note: MUST BE STREET ADDRESS)	Flagler Beach, FL 32136			
(b) Mailing address of limited liability company:	3399 N. Ocean Shore Blvd.			
(Note: MAY BE POST OFFICE BOX)	Flagler Beach, FL 32136			
3/24/2009	L09000028574			
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: Robert A. Leapley, Jr., Esq.				
7				
Registered Office Address:	245 Riverside Ave., Suite 400			
	Jacksonville, FL 32202			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	Jim Cullis			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3399 N. Ocean Shore Blvd.			
(Medi bull bolton birkebi habitebi)	Flagler Beach ,FL32136			
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 of authorized representative of a member				
Jim Cullis 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 of Registered Agent

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

INHS18 (05/08)