L09000041548

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
A. LUNT						
SEP - 6 2011						
EXAMINER						

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Office Use Only

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		C	COVER	LETTE	R			
1	FO: Registration Division of C							
S	SUBJECT: A-List Accounting & Bookkeeping							
		Name of I	Limited	Liability	Company			
[Dear Sir or Madam:							
7	The enclosed Regist	ered Agent/Registered C	Office C	hange ar	nd fee(s) are	submitted for	r filing.	
≜ F	Please return all cor	respondence concerning	this ma	itter to th	e following	:		
_		Laura Nelson						
		Name of Person					E B	
							E IS	-
	A List A	ccounting & Bookkeer	nina				SEP	ية الع التابيويونيون
-		Firm/Company						-
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							PM 12: 5 E. FLOW	يا با چ رستيس
		201 Randy Road					19 19	1. st
-		Address			ż			
							422	
		na City Beach, FL 324	<u>13</u>					
	C	City/State and Zip Code						
	a lista	ccounting@yahoo.cor	m					
	E-mail address: (to b	e used for future annual report n	otification	1)				
	٠							
F	or further informat	ion concerning this matte	er, plea	se call:				
	Lour	a Nelson		050		507 6000		
_		of Person	_ at (850)	527-6283 ime Telephone Nu		
	name o	of rerson		Ar	ea Code & Dayt	ime relephone Nu	imber	
	STREET/CO	URIER ADDRESS:		MAII	ING ADDR	ESS:		
	Registration S				ration Section			
		Division of Corporations			Division of Corporations			
	Clifton Buildi				lox 6327			
2661 Executive Center Circle				Tallah	assee, Florida	a 32314		
	Tallahassee, F	lorida 32301						
	Enclosed in	, abook for the following	10 0 00 0					
		a check for the followin	ig annoi					
	🖌 \$25 Filing	; Fee		\$55	Filing Fee &	certified Co	ру	

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:	A-List Accounting & Bookkeeping
2. (a) Principal office address of limited liability con	mpany: Laura Nelson
(<u>Note: MUST BE STREET ADDRESS</u>)	201 Randy Road Panama City Beach, FL 32413
(b) Mailing address of limited liability company:	A-List Accounting & Bookkeeping
(Note: MAY BE POST OFFICE BOX)	201 Randy Road Panama City Beach, FL 32413
April 29, 2009	L09000041548
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	vn on the records of the Florida Dept. of State:
Registered Agent:	Laura Nelson
Registered Office Address:	201 Randy Road Panama City Beach, FL 32413
<u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address: <u>(MUST BE FLORIDA STREET ADDRESS</u>)	
If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the cha of the members of the limited liability company or as or the operating agreement of the limited liability cor- Signature of a member or authorized representative of a member Laura Nelson Printed or typed name of signee I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to t and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability con-	the Florida street address of the registered office identical. Or, in the case of a Florida limited nge(s) was/were authorized by an affirmative vote otherwise provided in the articles of organization mpany.
Signature of Registered Agent	

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