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SECRETARY OF STATE

S. HAWKES

JAN 2 5 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
	PING SOURCE, LLC ted Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
CAROL HACKETT			
Name of Person			
BOOKKEEPING SOURCE, LLC Firm/Company			
v			
1863 VALLEY WOOD WAY Address			
, and the same of	•		
LAKE MARY, FLORIDA, 32746 City/State and Zip Code			
E-mail address: (to be used for future annual report notific	ation)		
For further information concerning this matter, please call:			
CAROL HACKETT at	(407) 346-6133		
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		

INHS18 (5/08)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOKH 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:BC	OOKKEEPING SOURCE, LLC
2. (a) Principal office address of limited liability compa	
(Note: MUST BE STREET ADDRESS)	1863 VALLEY WOOD WAY LAKE MARY, FLORIDA 32746
(b) Mailing address of limited liability company:	- Eq 至 O
(Note: MAY BE POST OFFICE BOX)	1863 VALLEY WOOD WAY LAKE MARY, FLORIDA, 32746
MAY 22, 2009	L0900050341
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:
Registered Agent:	CORPORATION SERVICE COMPANY
Registered Office Address:	1201 HAYS STREET TALLAHASSEE, FL 32301
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	CAROL HACKETT
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1863 VALLEY WOOD WAY
	LAKE MARY ,FL 32746
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company.	Florida street address of the registered office entical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote herwise provided in the articles of organization
Signature of a member or authorized representative of a member	
CAROL HACKETT Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statules relative to the pand I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to haddress, whereby confirm that the limited liability company.	l agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office iny has been notified in writing of this change.

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

Signature of Registered Agent