LU9UUU098292

| (Re | questor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | dress) | |
| · (Ad | dress) | |
| • | :y/State/Zip/Phone | . 40 |
| (CII | :y/State/Zip/Phone | · #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) - |
| . (23 | emess zmit, man | • |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | • | |





700186724627

10/25/10--01008--003 **25.00

SECRETARY OF STATE ONS DIVISION OF CORPORATIONS

B. KOHR NOV-42010 EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 1, 2010

WILLIAM MASON COURTNEY COURTNEY GROUP FINANCIAL LLC 5901 ALMOND TERRACE PLANTATION, FL 33317

SUBJECT: COURTNEY GROUP FINANCIAL LLC

Ref. Number: L09000098292

FILED STATE OF CORPORATIONS OCT 25 PM 1: 19

We have received your document for COURTNEY GROUP FINANCIAL LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate that SPIEGEL & UTRERA, P.A. is currently listed as your company's Registered Agent. If this is so, then SPIEGEL & UTRERA, P.A. should be listed as the company's current R.A. in Item 5(a).

Now in Item 5(b) you list the company's new Registered Agent.

On the form you have submitted, COURTNEY GROUP FINANCIAL, LLC is listed as the new Registered Agent. But a company cannot be its own Registered Agent.

What I think you want to do is to list an individual -- William Mason Courtney -- as the new R.A. This would be fine. Any individual with a Florida street address could serve as the R.A. But if this is your intention, then the name "William Mason Courtney" must be listed in Item 5(b).

I have been leaving several messages on your answering system to get your permission to make these changes myself, but I have so far been unable to get in touch with you.

You may contact me by e-mail (bkohr@dos.state.fl.us) or at my direct telephone number below. I have retained a copy of your document, and I could still make the changes, or you could return a revised form in the enclosed envelope.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr

Regulatory Specialist II

Letter Number: 110A00025693

COVER LETTER

Registration Section

TO:

Division of Corporations Courtney Group Financial, LLC **SUBJECT:** Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: William Mason Courtney Name of Person Courtney Group Financial, LLC Firm/Company 5901 Almond Terrace Address Plantation, FL 33317 City/State and Zip Code courtneygrp@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: William Mason Courtney Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: \$25 Filing Fee \$55 Filing Fee & Certified Copy

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: | Courtne | Courtney Group Financial, LLC | |
|---|--|---|--|
| 2. (a) Principal office address of limited liabil | (a) Principal office address of limited liability company: | | Financial, LLC |
| (Note: MUST BE STREET ADDRES | <u>590</u> Pla | 1 Almond Terrace Intation, FL 33317 | |
| (b) Mailing address of limited liability com | pany: | Courtney Group F | inancial, LLC |
| (Note: MAY BE POST OFFICE BO) | 590 Pla | 01 Almond Terrace ntation, FL33317 | - 12 S |
| 7/7/2010 | | | On Ethan |
| 3. Date of filing/registration in Florida | 4. D | ocument number | 13 TO 18 |
| 5. (a) Registered Agent and Registered Office | shown on the re | cords of the Florida Dep | pt. of State: |
| Registered Agent: | SPI | EGEL & UTRERA, P.A. | |
| Registered Office Address: | 184 | O S.W. 22ND STREET, | , 4TH FLOOR |
| | MIĄ | MI. FL 33145 | |
| (b) Enter name of <u>NEW Registered Agent</u> <u>NEW Registered Agent:</u> | | LIAM MASON COURTNEY | |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | | 1 Almond Terrace | |
| | ,Pla | ntation | _,FL <u>33317</u> |
| If the limited liability company is not organized confirmed that after the change or changes are and the business office of the registered agent valiability company, it is hereby confirmed that the of the members of the limited liability company or the operating agreement of the limited liability company or the operating agreement of the limited liability signature of a member or authorized representative of a member of a | made, the Florida vill be identical, ne change(s) was, or as otherwise ty company. | a street address of the reg Or, in the case of a Flor were authorized by an a | gistered office ida limited offirmative vote |
| Printed or typed name of signee | | | |
| I hereby accept the appointment as registered comply with the provisions of all statutes relationed I am familiar with and accept the obligation Chapter 608, F.S. Or, if this document is being address, I have by confirm that the limited liabil | vë to the proper o ns of my position | and complete performan i as registered agent as i | ice of my duties, provided for in |
| Signature of Registered Agent | | | • |

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