L10000005279

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SECULTARY OF STATE
ALLIANASSEE FI OBLOA

J. SAULSBERRY EXAMINER

OCT 4 2010

COVER LETTER

ŤO:	Registration Section Division of Corporations		
SUBJECT: Montcler Holdings, LLC Name of Limited Liability Company			
_			
Dear	Sir or Madam:		
The e	enclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.	
Pleas	e return all correspondence concerning	ing this matter to the following:	
	Lindsey Klemencic		
	Name of Person		
	National Registered Agents Firm/Company	s, Inc.	2010 OCT - I
	1 IIIII Company	Apy HL A	OCT
	11600 College Blvd., Suite	<u>210</u>	- PH
	Overland Park, KS 6621 City/State and Zip Code	10	3:17
	info@nrai.com E-mail address: (to be used for future annual repo	ort notification)	
For f	further information concerning this ma	natter, please call:	
	Lindsey Klemencic Name of Person	at (800) 550-6724 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 follow	wing amount:	
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

INHS18 (5/08)



National Registered Agents, Inc. 11600 College Boulevard Suite 210 Overland Park, KS 66210 800.550.6724 Fax 913.851.0713

September 27, 2010

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE:

Montcler Holdings, LLC

Change of Registered Office and Registered Agent

Dear Sir/Madam,

For the purposes of changing the registered office and registered agent of the above captioned Montcler Holdings, LLC, please find enclosed, in duplicate, a Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company accompanied by our check in the amount of Amount of \$25.00.

Please proceed with the filing of the enclosed, returning official receipts and evidence in the enclosed envelope.

Thank you in advance for your cooperation in this matter.

Sincerely,

Lindsey Klemencic

National Registered Agents, Inc.

Hirday Hemencio

Enclosure - Check

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:	Montcler Holdings, LLC		
2. (a) Principal office address of limited liability compan	y: Fall		
(Note: MUST BE STREET ADDRESS)			
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	PH 3: 7		
01/14/2010	L10000005279		
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:	Alys N Daniels		
Registered Office Address:	701 U.S. Highway One		
	402 North Palm Beach, FL 33408		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent:	W Registered Office address: NRAI Services, Inc.		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2731 Executive Park Drive, Suite 4		
(MUST BE FLORIDA STREET ADDRESS)	Weston ,FL33331		
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 or authorized representative of a member			
NANCY Mc6ill Printed or typed name of signce	_		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my pochater 608, F.S. Or, if this document is being filed to me address. I hereby confirm that the limited liability company NRAI Services, Inc. by: Andrew Diemerce Signature of Registered Agent Lindsey Klemencic, Assistant Secretary	agree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.		

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