## L10000005580

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(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
, (Business Entity Name)					
(Document Number)					
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SECRETARY OF STATE ALLAHASSEE, FLORIDA 2012 JAN 12 PM 1:

J. BRYAN

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EXAMINER



411 East Wisconsin Avenue Milwaukee, Wisconsin 53202-4497 Tel 414.277.5000 Fax 414.271.3552 www.quarles.com Attorneys at Law in: Phoenix and Tucson, Arizona Naples and Tampa, Florida Chicago, Illinois Milwaukee and Madison, Wisconsin Shanghai, China

Writer's Direct Dial: 414.277.5541 E-Mail: becky.diller@quarles.com

January 9, 2012

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE:

MRC Dayton Consulting, LLC FL Document # L10000005586

Dear Sir/Madam:

Enclosed for filing is an original and one photocopy of a Statement of Change of Registered Agent and Registered Office submitted on behalf of MRC Dayton Consulting, LLC. Also enclosed is a check in the amount of \$25.00 in payment of the filing fee.

Please file this change of registered agent with your Department as soon as possible and return a filed-stamped copy of the document to me. A postpaid return envelope is provided for your convenience.

Thank you for your assistance in this matter. If you have any questions, please call me.

Very truly yours,

Rebecca A. Diller Corporate Paralegal

Bicky Deller

Enclosures QB\15543470.1

## **COVER LETTER**

TO: Registration Section Division of Corpo					
SUBJECT:	_			ISULTING, LLC ity Company	
Dear Sir or Madam:					
The enclosed Registered	Agent/Registered O	ffice Ch	ange	and fee(s) are submitt	ed for filing.
Please return all correspon	idence concerning t	this matt	er to	the following:	
	KY DILLER				
Nan	e of Person				TASE TO
QUARLE	S & BRADY LLP			<u> </u>	器第二
Firm	/Company				PSSSA L
411 E WISCO	NSIN AVE STE 2	040			TALLAHASSEE, FLORIC
A	idress			_	124 124
MILWAU	JKEE WI 53202				P
City/Sta	e and Zip Code			<del></del>	
Michael.R.C	ordone@gmail.co				
For further information co	ncerning this matte	r, please	call	:	
BECKY DI	LER	at (	114		
Name of Perso	n			Area Code & Daytime Telep	hone Number
STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, Florida	tions ter Circle		Reg Div P.O	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 lahassee, Florida 32314	
Enclosed is a che	ck for the followin	g amoui	nt:		
\$25 Filing Fee		Γ	<b>7</b> \$5	55 Filing Fee & Certifi	ed Copy

INHS18 (5/08) QB\15458786.1

## 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:	MRC DAYTON CONSULTING, LLC
2. (a) Principal office address of limited liability c	ompany:
(Note: MUST BE STREET ADDRESS)	9124 TERRABELLA CARANAPLES FL 34109
(b) Mailing address of limited liability company	Y: SAME
(Note: MAY BE POST OFFICE BOX)	
01/15/2010	L10000005586
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho	own on the records of the Florida Dept. of State:
Registered Agent:	NAPLES-LAWDOCK, INC.
Registered Office Address:	1995 PANTHER LN
A STATE OF THE STA	STE 300 SALES STE 300 SALES STEEN ST
(b) Enter name of NEW Registered Agent and	of million is the million of plant of the relative property of the second
The state of the s	
NEW Registered Agent:	MICHAEL R CORDONE
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRES	9124 TERRABELLA CT NAPLES ,FL 34109
If the limited liability company is not organized unconfirmed that after the change or changes are made and the business office of the registered agent will liability company, it is beteby confirmed that the chof the members of the limited hability company or the operating agreement of the limited liability company.	der the laws of the State of Florida, it is hereby e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited tange(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization ompany.
Signature of a member or authorized representative of a member	
MICHAEL R CORDONE, PRESIDENT Printed or typed name of signee	the first of the state of the s
I hereby accept the appointment as registered ager comply with the provisions of all statutes relative to and lyum familiar with and accept the obligations of Chapter 608, V.S. Or, If this document is being file address, I hereby confirm that the limited liability confirms the limited liability liability confirms the limited liability liabili	nt and agree to act in this capacity. I further agree to the proper and complete performance of my duties, f my position as registered agent as provided for in d to merely reflect a change in the registered office ompany has been notified in writing of this change.
Sgnature of Registered Agent MICHAEL R CORDONE	_ = \( \langle \cdot \cd

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