## 2100000013589

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
A. LUNT	
FEB <b>2 3</b> 2010	
EXAMINER	

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01/31/11--01027--011 \*\*35.00



Office Use Only

## COVER LETTER

Division of Corporations
SUBJECT: FIRST KEY HOME INSPECTION SERVICE LLC Name of Corporation
DOCUMENT NUMBER: <u>L10000013589</u>
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CHARLES H. BROWN
Name of Contact Person
FIRST KEY HOME INSPECTION SERVICE LLC
2298 E. CELINA ST.
Address
INVERNESS FL 34453 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
CHARLES H. BROWN at (352, 586-4856

Enclosed is a \$35.00 check made payable to the Department of State.

Name of Contact Person

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Area Code & Daytime Telephone Number



February 4, 2011

CHARLES H BROWN 2298 E. CELINA ST. INVERNESS, FL 34453

SUBJECT: FIRST KEY HOME INSPECTION SERVICE LLC

Ref. Number: L10000013589

We have received your document for FIRST KEY HOME INSPECTION SERVICE LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6094.

Letter Number: 411A00003069

Agnes Lunt Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: FIRST KEY HOME Name of Limi	ENSPECTION SERVICE ted Liability Company	<u> </u>
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:	
CHARLES H. BROWN Name of Person  FIRST KEY HOME INSPECTION Firm/Company  2298 E. CELINA-ST. Address  City/State and Zip Code  FIRST KEY @ TAMPABAY & E-mail address: (to be used for future annual report notific	WASSEE, FLORIBA	2011 FEB 22 AM III: 18
For further information concerning this matter, p	lease call:	
CHARLES H. BROWN at	352 586-4856	
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 an	nount:	
\$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: First K	EX HOME INSPECTION SERVICE LL
2. (a) Principal office address of limited liability company	- 00 E/1-1 10 C-
(Note: MUST BE STREET ADDRESS)	INVERNESS, FL. 34453
(b) Mailing address of limited liability company:	2298 E. CELINA ST.
(Note: MAY BE POST OFFICE BOX)	INVERNESS, FL. 34453
FEB 5, 2010	L100000/3589
3. Date of filing/registration in Florida	1. Document number
5. (a) Registered Agent and Registered Office shown on the	<i>A</i> '
Registered Agent:	UNITED STATES CORPORATION AGENT
Registered Office Address:	13302 WINDING DAKS BLUD ATOO TAMPA, FL 33612
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW</u> Registered Agent:  NEW Registered Office Address: . (MUST BE FLORIDA STREET ADDRESS)	HARLES H. BROWN  2298 E. CELINA STI  INVERNESS FL 34453
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identicability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member  HARKS H. BROWN	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affective vote.
Printed or typed name of signee	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statules relative to the pro- and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mer- address thereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
Signature of Registered Agent	

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