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(Requestor's Name)	
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(Address)	
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(City/State/Zip/Phone #)	
(Only/State/Zip/Fillotte #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
L. SELLERS	
SEP - 1 2010	
EXAMINER	

Office Use Only



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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Flagship Advisory & Management Group, LLC.		
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:		
Wayne D. Linsley Name of Person		
Name of Person		
Flagship Advisory & Management Group, LLC.		
Firm/Company		
456 NE 2nd Avenue		
Address		
Fort Lauderdale, Florida 33301		
City/State and Zip Code		
wlinsley@flagshipamg.com E-mail address: (to be used for future annual report notification)		
E-man address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Wayne D. Linsley at (9	54) 773-4399	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building 2661 Executive Center Circle	P.O. Box 6327	
Tallahassee, Florida 32301	Tallahassee, Florida 32314	
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: Flagship Ac	dvisory & Management Group, LLC.
2. (a) Principal office address of limited liability company	y: 456 NE 2nd Ave
(Note: MUST BE STREET ADDRESS)	Fort Lauderdale, Florida 33301
(b) Mailing address of limited liability company:	456 NE 2nd Ave
(Note: MAY BE POST OFFICE BOX)	Fort Lauderdale, Florida 33301
02/05/2010	L10000014020
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:	Wayne D. Linsley
Registered Office Address:	3201 NE 14th St CSWY Pompano Beach, FL 33062
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	W Registered Office address:
NEW Registered Agent:	Wayne D. Linsley
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	456 NE 2nd Ave
	Fort Lauderdale ,FL 33301
If the limited liability company is not organized under the l confirmed that after the change or changes are made, the FI and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Wayne D. Linsley Printed or typed name of signee I hereby accept the appointment as registered agent and accomply with the provisions of all statutes relative to the province of a member of liability company with the provisions of all statutes relative to the province of liability company. Signature of Registered egent Signature of Registered egent	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an address vote wise provided in the articles of organization.

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