

L10000023839

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

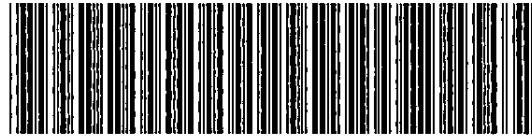
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100242298081

12/07/12--01009--009 \*\*25.00

12 DEC -7 PM 3:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

D. BRUCE  
DEC 10 2012  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Computer Excellence, 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:

Wasim Andrews

Name of Person

Computer Excellence, LLC

Firm/Company

PO Box 213194

Address

Royal Palm Beach, FL 33421-3194

City/State and Zip Code

fly440@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wasim Andrews

Name of Person

at ( 561 ) 628-8853

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 amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

APPROVED  
AND  
FILED  
12 DEC - 7 PM 3:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: Computer Excellence, LLC

2. (a) Principal office address of limited liability company: 1402 Royal Palm Beach Blvd. Bldg. 700 Suite #108  
**(Note: MUST BE STREET ADDRESS)** Royal Palm Beach, FL 33411

(b) Mailing address of limited liability company: P.O. Box 213194  
**(Note: MAY BE POST OFFICE BOX)** Royal Palm Beach, FL 33421-3194

March 3, 2010

L10000023839

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: Wasim Andrews

Registered Office Address: 1336 Olive Tree Circle  
Greenacres, FL 33413

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address:**

**NEW Registered Agent:** Wasim Andrews

**NEW Registered Office Address:**  
**(MUST BE FLORIDA STREET ADDRESS)** 1402 Royal Palm Beach Blvd. Bldg. 700 Suite #108  
Royal Palm Beach, FL 33411

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.

Wasim Andrews  
Signature of a member or authorized representative of a member

Wasim Andrews  
Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Wasim Andrews  
Signature of Registered Agent

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

APPROVED  
AND  
FILED  
12 DEC - 7 PM 3:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA