## L10000030732

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J. BRYAN

JUN -1 2010

EXAMINER

## **COVER LETTER**

Division of Corp	orations					
SUBJECT:	Celestia	l Snhe	re Co	nsultants	HC	
SUBJECT: Celestial Sphere Consultants, LLC.  Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered	l Agent/Registered	Office (	Change	and fee(s) are	e submitted f	or filing.
Please return all corresp	ondence concernin	g this m	atter to	the following	<b>;</b> :	
	obert J. Mullaney			_		
	nere Consultants,	LLC.		<del></del>		
· · · · · · · · · · · · · · · · · · ·	1 SW 81 Way		· ·	_		10 MAY 28 PM 1:54 SECRETARY OF STATE
Dav	vie, FL 33328			_		ARY OF S
City/S	tate and Zip Code					F. 2
robert@	businessdrs.com	1				****
E-mail address: (to be use	for future annual report	notificatio	n)	_		
For further information of	concerning this mat	ter, plea	se call:			
Dr. Robert J.		at (	786		556-1557	
Name of Per	son		A	rea Code & Day	time Telephone I	Number
STREET/COURI Registration Section Division of Corpora Clifton Building 2661 Executive Ce Tallahassee, Florid	on rations enter Circle		Regi Divis P.O.	LING ADDR stration Section sion of Corpor Box 6327 hassee, Florid	n ations	
Enclosed is a ch	eck for the followi	ng amo	unt:			
\$25 Filing Fee	;		T \$55	Filing Fee &	c Certified C	onv

TO: Registration Section

## 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: Ce	elestial Sphere Consultants, LLC.			
2. (a) Principal office address of limited liability comp	oany:			
(Note: MUST BE STREET ADDRESS)	13334 SW 100 Terrace Miami, FL 33186			
(b) Mailing address of limited liability company:				
(Note: MAY BE POST OFFICE BOX)	13334 SW 100 Terrace Miami, FL 33186			
3/19/2010	L10000030732			
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:	Robert J. Mullaney			
Registered Office Address:	13334 SW 100 Terrace Miami, FL 33186			
	Miami, FL 33186			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:				
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2781 SW 81 Way Davie, FL 33328			
	,FL			
If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be idealiability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company or as of or the operating agreement of the limited liability company or as of the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member  Robert J. Mullaney  Printed or typed name of signee  I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	e Florida street address of the registered office lentical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote therwise provided in the articles of organization any.			

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

Signature of Registered Agent