## 110000040453

(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



700189048997

12/29/10--01011--016 \*\*55.00

SECRETARY OF STATEMENT ALLAHASSEE, FLORE

T. CLINE

DEC 30 2010

**EXAMINER** 

## **COVER LETTER**

TO:	Registration Section Division of Corporation	ons						
SUBJ	ECT:	CONSULT Name of L			<del> </del>	LLC		
		Name of L	minea L	iability C	ompany			
Dear :	Sir or Madam:							
The e	nclosed Registered Age	nt/Registered O	ffice Cha	inge and	fee(s) are	submitted fo	r filing.	
Please	e return all corresponder	ice concerning	this matte	er to the f	ollowing:			
	TREVOR E	) SEFFREN						
	Name of	Person						
	•							
	CONSULTING SE		LLC	<del>. "2</del>				
	- Firm/Con	ipany					× 00	~
								<u></u>
23	85 NW EXECUTIVE O	ENTER DR.	SUITE 1	00				멾
	Addres	s	· ·				SSS	
								9
	BOCA RATO	N, FL 33431					(2) (5)	
City/State and Zip Code						W CID		
							trati ( Tri	er:
	TDGLS07@ -mail.address: (to be used for fu	GMAIL.COM						
E	-mail.address: (to be used for fu	ture annual report no	otification)					
For fu	orther information conce	rning this matte	er, please	call:				
	TŘEVOR ŠĚFFF	RÈN	at ( <u>5</u>	61_)_		281-9004		
•	Name of Person			Area C	ode & Dayti	ime Telephone N	lumber	
	STREET/COURIER A	DDRESS:		MAILIN	G ADDRI	ESS:		
	Registration Section				ion Section			
	Division of Corporations	S			of Corpora	ations		
	Clifton Building 2661 Executive Center Q	Pirole		P.Ö. Box	6327 ee, Florida	32314		
	Tallahassee, Florida 323			Turiuriuss	ee, i ioriac	1 3 2 3 ,1 4		
	Enclosed is a check for	or the following	g amoun	t:				
	\$25 Filing Fee		17	∕ √\$55 Fil	ing Fee &	Certified C	ору	

## 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.

(Note: MUST BE STREET ADDRESS)  SUITE 100 BOCA RATON FL 33431  (b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  APRIL 15, 2010  3. Date of filing/registration in Florida  SUITE 100 BOCA RATON FL 33431  L10000040453  4. Document number  5. (a) Registered Agent and Registered Office shown on the records of the Florida Depts of State:  Registered Agent:  Registered Office Address:  Registered Office Address:  NEW Registered Agent:  NEW Registered Agent:  NEW Registered Office Address:  (MUST BE FLORIDA STREET ADDRESS)  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 after matic to 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 it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and it is hereby confirmed that the change (s) was/were authorized by an affirmative volument.	Name of the limited liability company:C	ne of the limited liability company: CONSULTING SERVICES MG LLC						
BOCA RATON FL 33431  (b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  APRIL 15, 2010  3. Date of filing/registration in Florida  4. Document number  5. (a) Registered Agent and Registered Office shown on the records of the Florida Deptc of State:  Registered Agent:  Registered Office Address:  Registered Office Address:  (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  NEW Registered Agent:  NEW Registered Office Address:  (must be recorded agent and/or NEW Registered Office address:  (must be recorded agent and/or NEW Registered Office address:  (must be recorded agent and/or NEW Registered Office address:  (must be recorded agent and/or NEW Registered Office address:  (must be recorded agent and/or NEW Registered Office address:  (must be recorded agent and/or NEW Registered Office address:  (must be recorded agent and/or NEW Registered Office address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limitive voltability company it is hereby confirmed that the change of that the change(s) was/were authorized by a florida limitive voltability company it is hereby confirmed that the change(s) was/were authorized by a florida limitive voltability company it is hereby confirmed that the change(s) was/were authorized by a florida limitive voltability company it is hereby confirmed that the change(s) was/were authorized by a florida limitive voltability company it is hereby confirmed that the change(s) was/were authorized by a florida limitive voltability company it is hereby confirmed that the change(s) was/were authorized by a florida limitive voltability company it is hereby confirmed agent was/were authorized by a florida limitive voltability company it is hereby confirmed agent was/were authorized by a florida limitive voltability company it is hereby confirmed agent was/were authorized by a florida limitive voltability company it is hereby confirmed agent was/were authorized by	(a) Principal office address of limited liability con	mpany: 2385 nw executive center dr						
(Note: MAY BE POST OFFICE BOX)  SUITE 100 BOCA RATON FL 33431  APRIL 15, 2010  L10000040453  3. Date of filing/registration in Florida  4. Document number  5. (a) Registered Agent and Registered Office shown on the records of the Florida Depth of State:  Registered Agent:  Registered Office Address:  Registered Office Address:  NEW Registered Agent:  NEW Registered Agent:  NEW Registered Office Address:  (MUST BE FLORIDA STREET ADDRESS)  SUITE 100 BOCA RATON FL 33431  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 void immited.	(Note: MUST BE STREET ADDRESS)	SUITE 100 BOCA RATON FL 33431						
APRIL 15, 2010  APRIL 15, 2010  L10000040453  4. Document number  5. (a) Registered Agent and Registered Office shown on the records of the Florida Depte of State:  Registered Agent:  Registered Office Address:  Registered Office Address:  (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  NEW Registered Agent:  NEW Registered Office Address:  (MUST BE FLORIDA STREET ADDRESS)  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 vol	(b) Mailing address of limited liability company:	2385 nw executive center dr						
3. Date of filing/registration in Florida  4. Document number  5. (a) Registered Agent and Registered Office shown on the records of the Florida Depth of State:  Registered Agent:  Registered Office Address:  Registered Office Address:  (b) Enter name of NEW Registered Agent  NEW Registered Agent:  NEW Registered Office Address:  NEW Registered Office Address:  (b) Enter name of NEW Registered Agent  NEW Registered Office Address:  (c)  NEW Registered Office Address:  (d)  SUITE 100  BOCA RATON  FL 33431  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 vol	(Note: MAY BE POST OFFICE BOX)							
5. (a) Registered Agent and Registered Office shown on the records of the Florida Depts of State:  Registered Agent:  Registered Office Address:  TREVOR D SEFFREN  BOCA RATON FL 33496  (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  NEW Registered Agent:  NEW Registered Office Address:  (MUST BE FLORIDA STREET ADDRESS)  SUITE 100  BOCA RATON  FL 33431  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 your	APRIL 15, 2010	L10000040453						
Registered Agent:  Registered Office Address:    Solution   TREVOR D SEFFREN   TREVOR D S	Date of filing/registration in Florida	4. Document number						
Registered Office Address:    TREVOR D SEFFREN								
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  NEW Registered Office Address:  (MUST BE FLORIDA STREET ADDRESS)  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 vol	Registered Agent:							
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  NEW Registered Office Address:  (MUST BE FLORIDA STREET ADDRESS)  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 vol	Registered Office Address:	5537 N MILITARY TRL #1905 BOCA RATON FL 33498						
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 vol	(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:							
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 vol		SUITE 100						
of the members of the limited liability company or as otherwise provided in the articles of organizatio or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member								
TREVOR D SEFFREN Printed or typed name of signee		· ·						
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree comply with the provisions of all statutes relative to the proper and complete performance of my dutie 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	hereby accept the appointment as registered agent of the provisions of all statutes relative to the difference of the angular with and accept the obligations of the provisions of the provision	and agree to act in this capacity. I further agree to he proper and complete performance of my duties, ny position as registered agent as provided for in to merely reflect a change in the registered office npany has been notified in writing of this change.						

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