

L10000054984

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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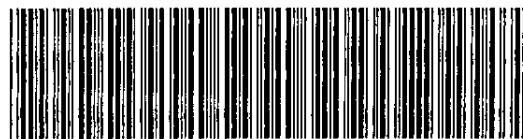
(Business Entity Name)

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11 MAR - 7 PM 2:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

MAR 8 2011

EXAMINER

BRONSTEIN, CARLSON, GLEIM, SHASTEEN & SMITH, P.A.

Joel D. Bronstein
Board Certified in Tax Law

Suite 1100
150 Second Avenue North
St. Petersburg, Florida 33701-3355

(727) 898-6688
Fax (727) 898-8811

Susan W. Carlson
Board Certified in Tax Law

Holger D. Gleim
Board Certified in Wills, Trusts & Estates

Philip M. Shasteen

Thomas B. Smith
Board Certified in Health Law

Writer's E-Mail Address:

sthomas@bcgs-law.com

Refer to File No.

Writer's Direct Dial No.

20101034

(727) 898-6690

March 3, 2011

Registered Agent/Address Section
Bureau of Corporate Records
Division of Corporations
Department of State
P.O. Box 6327
Tallahassee, FL 32314

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11 MAR -7 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: Lamson Consulting, LLC

Gentlemen:

Enclosed please find two originals of the Change of Registered Office and Agent documents for the referenced Florida company along with our client's check in the amount of \$25.00 representing the filing fee.

Please acknowledge filing of this document by stamping one of the originals and returning same to me.

If you have any questions in connection with the documents, or need further information, please contact me by telephone rather than returning the document.

Very truly yours,


Sue Thomas, CP, FRP

Paralegal to Joel D. Bronstein

ST/sb
Enclosures

CHANGE OF REGISTERED OFFICE AND AGENT
OF
LAMSON CONSULTING, LLC

TO: SECRETARY OF STATE OF FLORIDA

1. The name of the Limited Liability Company is LAMSON CONSULTING, LLC.
2. The current registered office is located at 150 Second Avenue North, Suite 1100, St. Petersburg, Florida 33701.
3. The registered office will be changed to 2650 Heron Lane South, Clearwater, Florida 33762.

THIS IS THE CORRECT BUSINESS ADDRESS OF THE COMPANY,
PLEASE CHANGE YOUR RECORDS ACCORDINGLY.

4. The current registered agent is Joel D. Bronstein.
5. The successor registered agent will be John C. Lamson.
6. The street address of the Limited Liability Company's registered office and the business office of its registered agent, as changed above, will be identical.
7. All changes made above have been authorized by the Limited Liability Company's Member/Manager as authorized by the Operating Agreement.

DATED: 2/20, 2011

LAMSON CONSULTING, LLC

By: [Signature]
John C. Lamson, Manager

ACKNOWLEDGMENT

I hereby accept to act in this capacity, and agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with and accept the obligations of 608.415, Florida Statutes.

[Signature]
John C. Lamson
Registered Agent

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11 MAR 17 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA