L10000072887

(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:		
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SECRETARY OF STATE ALLAHASSEF, FI OBITA

J. SAULSBERRY EXAMINER JUL **3** 2012

COVER LETTER

TO: Registration Section Division of Corpo		
SUBJECT:	Stowe Consultin	· · · · · · · · · · · · · · · · · · ·
	Name of Limited Lial	bility Company
Dear Sir or Madam:		
The enclosed Registered	Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspo	ndence concerning this matter	to the following:
	d W. Stowe, Jr.	
Nan	ne of Person	
	ulting Services, LLC	
1.111	reompany	
		SECRETARY OF STATE ALLAHASSEE, FLORID,
89 Ri	ver Run Blvd	<u> </u>
Α	ddress	ASE N
		M 29 AM & ; MARY OF STAP ASSEE, FLORI
Ponte V	/edra Fl 32081	<u> </u>
Ponte Vedra, FL 32081 City/State and Zip Code		
	p =====	₩ ₩
mustaus Of	000@hatii aa	GA 20
E-mail address; (to be used	009@hotmail.com for future annual report notification)	
	,	
For further information co	oncerning this matter, please ca	all:
Richard W. St	towe, Jr. at (770	561-7572
Name of Person		Area Code & Daytime Telephone Number
STREET/COURIE	PADDRESS N	AAILING ADDRESS:
Registration Section		egistration Section
Division of Corporations Division of Corporations		
Clifton Building		
2661 Executive Center Circle Tallahassee, Florida 32314		allahassee, Florida 32314
Tallahassee, Florida	32301	
Enclosed is a che	ck for the following amount:	
\$25 Filing Fee	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.

Name of the limited liability company: Stowe Consulting Services, LLC	
2. (a) Principal office address of limited liability co	ompany: 89 River Run Blvd
(Note: MUST BE STREET ADDRESS)	Ponte Vedra, FL 32081
(b) Mailing address of limited liability company	: 89 River Run Blvd
(Note: MAY BE POST OFFICE BOX)	Ponte Vedra, FL 32081
July 12, 2010	L10000072887
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho	wn on the records of the Florida Dept. of State:
Registered Agent:	Richard W. Stowe, Jr.
Registered Office Address:	13937 Perdido Key Dr., #1101
	Pensacola, FL 32507-7464
(b) Enter name of <u>NEW Registered Agent</u> and/ <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address:	89 River Run Blvd
MUST BE FLORIDA STREET ADDRES	S) Ponte Vedra ,FL32081
If the limited liability company is not organized und confirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the choof the members of the limited liability company or a or the operating agreement of the limited liability constitution of a member of a mem	ler the laws of the State of Florida, it is hereby to, the Florida street address of the registered office the identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote
Division of Corporations, P.O. Fit INC.	Box 6327, Tallahassee, FL 32314 FEE: \$25.00
TNHS18 (05/08)	\$