

L11000011111

(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:

Virginia Grabowski GAVE

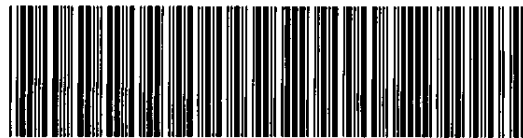
AUTHORIZATION BY PHONE TO

CORRECT *New BO # "23562 Brandon Blvd. " add.*

DATE *10/16/11*

ISS. EXAM *elt*

Office Use Only



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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Forensic Soil Solutions, 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:

Virginia Grabowski
Name of Person

Forensic Soil Solutions, LLC
Firm/Company

235 West Brandon Blvd #623
Address

Brandon, FL 33511
City/State and Zip Code

virginia@forensicsoilsolutions.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Virginia Grabowski at (813) 398-2208
Name of Person 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

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: Forensic Soil Solutions, LLC

2. (a) Principal office address of limited liability company: 235 W. Brandon Blvd #623

(Note: **MUST BE STREET ADDRESS**)

Brandon, FL 33511

(b) Mailing address of limited liability company:

Same

(Note: **MAY BE POST OFFICE BOX**)

1/26/11

3. Date of filing/registration in Florida

L11000011111

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Virginia Grabowski

Registered Office Address:

504 Apache Lane

Seffner

FL33511

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

NEW Registered Agent:

Same

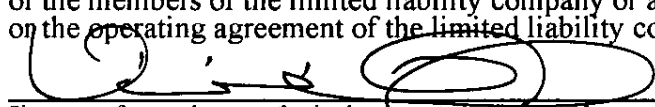
NEW Registered Office Address:

235 W. Brandon Blvd #623

(MUST BE FLORIDA STREET ADDRESS)

Brandon, FL 33511

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.


Signature of a member or authorized representative of a member

Virginia Grabowski

Printed or typed name of signer

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.


Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00