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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone #)	
PICK-UP		
(Bu	siness Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
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	EXAMINER	

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Office Use Only

COVER LETTER

TO: **Registration Section Division of Corporations**

SUBJECT: FL. ConSultants, 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:

jeane iary of sti Allahassee, flo Javier Zeballos Name of Person 29 2 FL. Consultents, LLC_________ Þ 1516 E. Colonial DR StE 306 Orlando, FL. 32803 City/State and Zip Code Lavier - Zeballo OHotmard. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person at (407) 512-6581 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:



\$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.

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1. Name of the limited liability company: _FL. Car	sultants, LLC
2. (a) Principal office address of limited liability company	1516 E. Colonial DR.
(<u>Note: MUST BE STREET ADDRESS</u>)	0110000 FL 32803 Ste 306
(b) Mailing address of limited liability company:	
(<u>Note: MAY BE POST OFFICE BOX</u>)	1514 E. Colonial BR. Ollondo, FL. 328/03 StE 304
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:
Registered Agent:	Javier Zeballos
Registered Office Address:	ISILE E. Colonial DR. Orlando, FL 32803 Ste 306
(b) Enter name of NEW Registered Agent and/or NEW	V Registered Office address:
NEW Registered Agent:	Sunai Regep
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Orlando, FL 32803
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identic liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherw or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member $\frac{\int c_{12} c_{12} c_{12}}{\int c_{12} $	brida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of organization
comply with the provisions of all statutes relative to the proj and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mere address, I hereby confirm that the limited liability company Signature of Registered Agent	per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.

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

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