

L11000066093 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

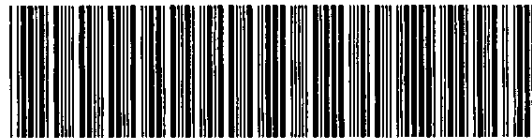
(Business Entity Name)

(Document Number)

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2013 SEP 17 PM 4:24  
TALLAHASSEE, FLORIDA

B. BOSTICK  
SEP 18 2013  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Elite Midlevel Staffing 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:

Heather L Wray

Name of Person

Elite Midlevel Staffing LLC

Firm/Company

10702 NW 80th Circle

Address

Parkland, Florida 33076

City/State and Zip Code

hlzrn@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Heather L Wray

Name of Person

at ( 239 ) 691-0044

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

2013 SEP 17 PM 4:24  
TALLHASSEE, FLORIDA

**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: Elite Midlevel Staffing LLC

2. (a) Principal office address of limited liability company: 13961 Lake Mahogany Blvd #2711  
**(Note: MUST BE STREET ADDRESS)** Fort Myers, Florida 339-07

(b) Mailing address of limited liability company: 13961 Lake Mahogany Blvd #2711  
**(Note: MAY BE POST OFFICE BOX)** Fort Myers, Florida 33907

June 6th, 2011

L11000066093

3. Date of filing/registration in Florida

4. Document number

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

Registered Agent: Heather L Wray Manager

Registered Office Address: 13961 Lake Mahogany Blvd #2711  
Fort Myers, Florida 33907

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

**NEW Registered Agent:** Heather L Wray Manager

**NEW Registered Office Address:** 10702 NW 80th Circle  
**(MUST BE FLORIDA STREET ADDRESS)**

Parkland, FL 33076

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.

Heather L Wray Manager  
 Signature of a member or authorized representative of a member

Heather L Wray  
 Printed or typed name of signee

*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.*

Heather L Wray Manager  
 Signature of Registered Agent

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