L11000092518

(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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02/16/12-01022-006 ***25.00

C. LEWIS FEB 1 7 2012 **EXAMINER**

· COVEŔ LETTER *

TO:	Registration Section Division of Corporations	
SUBJ		revail Systems LLĊ
	Name of	Limited Liability Company
Dear :	Sir or Madam:	
The e	nclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please	e return all correspondence concerning	this matter to the following:
	Yarly Franco	
	Name of Person	
	Greenspoon Marder PA	<u> </u>
	Firm/Company	·
	100 West Cypress Creek Rd Su Address	ite 700
	Fort Lauderdale FL 33309 City/State and Zip Code)
E	yarly.franco@gmlaw.com	notification)
For fu	rther information concerning this mat	ter, please call:
	Yarly Franco	at (954) 491-1120
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:	MAILING ADDRESS:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations
	Clifton Building	P.O. Box 6327
	2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
	Enclosed is a check for the following	ng amount:
	√ \$25 Filing Fee	S55 Filing Fee & Certified Conv

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:	Prevail System LLC			
2. (a) Principal office address of limited liability company	2240 West Woolbright Rd			
(Note: MUST BE STREET ADDRESS)	Suite 200 Boyton Beach, FL 33426			
(b) Mailing address of limited liability company:	2240 West Woolbright Rd			
(Note: MAY BE POST OFFICE BOX)	Suite 200 Boyton Beach, FL 33426			
08/11/2011	L11000092518			
3. Date of filing/registration in Florida	4. Document number $\frac{1}{2}$			
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept of State			
Registered Agent:	Frank Maiello			
Registered Office Address:	951 HOLLY LANE			
	BOCA RATON FL 33486			
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:				
NEW Registered Agent:	<u>Frank Maiello</u>			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2240 WOOLBRIGHT ROAD STE. 200 BOYNTON BEACH ,FL33426			
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				
Printed or typed name of signee	-			
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely 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