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SECRETARY OF STATE FLORIDA

#### **COVER LETTER**

**TO:** Registration Section Division of Corporations

# SUBJECT: One Litigation Services, 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:

## Seema W. Rowley

Name of Person

#### One Litigation Services, LLC

Firm/Company

#### 633 East Colonial Drive

Address

#### Orlando, FL 32803

City/State and Zip Code

## accounting@orangelegal.com

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

For further information concerning this matter, please call:

# Seema W. Rowley

<sub>at (</sub>407

898-4200

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: One Litigation Servi	ces, LLC	
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	ness, 633 Fast Colonial Drive	SEF ARET
	Orlando, FL 32803	
	CHEMOST E OZOGO	
		rno
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		in ⊋
		<u></u>
		> 2
09/29/2009	L11000108667	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown o Registered Agent:	n the records of the Florida	Dept. of State:
Registered Office Address:		
	1416 East Robinson Street	
	Orlando, FL 32801	
NEW Registered Agent:  NEW Registered Office Address:	633 East Colonial Drive	***************************************
(MUST BE FLORIDA STREET ADDRESS)	000 220, 0000,101 21110	
	Orlando	.FL 32803
f the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change he members of the limited liability company or as otherwhe operating agreement of the limited liability company.	Florida street address of the ntical. Or, in the case of a F	registered office
Signature of a member or authorized representative of a member	<del></del>	
Roberta Barrett		
Printed or typed name of signee		
I hereby accept the appointment as registered agent and comply with the provisions of all statules relative to the pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pand the complete to 08, F.S. Or, if this document is being filed to address Deethy compand the limited hability compand.	agree to act in this capacity proper and complete perform position as registered agent werely reflect a change in write my has been notified in write	in I further agree to ance of my duties, as provided for in expense of this observed.

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