## L12000626659

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EXAMINER



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## **COVER LETTER**

Division of Corpora	tions			
SUBJECT:	Mehta Cor	sultatio	on Group	o, LLC
	Name of Limi			
Dear Sir or Madam:				
The enclosed Registered A	gent/Registered Offic	e Change	and fee(s)	are submitted for filing.
Please return all correspond	lence concerning this	matter to	the follow	ving:
•	<b>5.4</b> a b 4 a			
	ur Mehta of Person		<u> </u>	
			<u> </u>	
Firm/C	Company			
6529 Iron Liege Trail		<del></del>	to grandfighedt to	
Add	ress			
	see, Fl 32309 and Zip Code		_	CT, I
City/State	and Zip Code			
ankurmehta E-mail address: (to be used for	a.id@gmail.com future annual report notific	ation)	_	
For further information con	cerning this matter, p	lease call	l <b>:</b>	
Ankur Meh	ta at	( 904	_)	612-3757
Name of Person			Area Code &	Daytime Telephone Number
STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, Florida 3	ons r Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check	for the following a	nount:		
\$25 Filing Fee		<b>\[ \]</b> \$5	55 Filing F	ee & Certified Copy

TO:

Registration Section

## 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:	Mehta Consultation Group, LLC
2. (a) Principal office address of limited liability c	ompany: 6529 Iron Liege Train
(Note: MUST BE STREET ADDRESS)	Mehta Consultation Group, LLC ompany: 6529 Iron Liege Train Tallahassee, FL 32309
(b) Mailing address of limited liability company	
(Note: MAY BE POST OFFICE BOX)	Tallahassee, FL 32309
2/24/12	L12000026659
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho	own on the records of the Florida Dept. of State:
Registered Agent:	Ankur Mehta
Registered Office Address:	2617 Vassar Road Tallahassee, FL 32309
(b) Enter name of <u>NEW Registered Agent</u> and	or NEW Registered Office address:
NEW Registered Agent:	Ankur Mehta
NEW Registered Office Address: 6529 Iron Liege Trail (MUST BE FLORIDA STREET ADDRESS)	
•	Tallahassee ,FL32309
If the limited liability company is not organized und confirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the confirmed that the confirmed that the confirmed that the confirmed present of the limited liability company or a confirmed or a member or authorized representative of a member	der the laws of the State of Florida, it is hereby e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited lange(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization ompany.
Ankur Mehta	
Printed or typed name of signee  I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being file address, I hereby confirm that the limited liability of Signature of Registered Agent	nt and agree to act in this capacity. I further agree to the proper and complete performance of my duties, f my position as registered agent as provided for in d to merely reflect a change in the registered office ompany has been notified in writing of this change.

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