L12000128182

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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 8, 2017

BETTY J.MARKEY 1235 LENOX BLOOMFIELD HILLS, MI 48304

SUBJECT: B.J. MARKEY AND ASSOCIATES LLC

Ref. Number: L12000128182

We have received your document for B.J. MARKEY AND ASSOCIATES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 417A00011583



COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	B.J. Markey and Associa	tes LL			
	Name of Limited Liability Company				
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.			
Please	return all correspondence concerning	this matter to the following:			
Betty	J.Markey				
_	Name of Person				
B.J. N	Markey and Associates, LLC				
	Firm/Company	 			
1235	Lenox				
	Address				
Bloon	nfield Hills, MI 48304				
 ,	City/State and Zip Code				
bj@bj	imarkey.com				
Е	-mail address: (to be used for future a	nnual report notification)			
For fur	ther information concerning this matte	er, please call:			
Betty	Markey	248 792-5977 at ()			
	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			

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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:			
2. (a	B.J. Markey and Associates LLC	(b) 123	5 Lenox Dr, Bloomfield Hills, MI 48304	
	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
3.	October 8,2012 Date of filing/registration in Florida	L1200	00128182 Document number	
5. (a	Registered Agent and Registered Office shown on the records of Betty J. Markey		f State:	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
7920 Mahogany Run Lane #1013				
	Naples, F	34113	17 17 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18	
(b	Enter name of NEW Registered Agent and/or NEW Registered		17 JUN 16 AM 9: 45	
	NEW Registered Office Address:		₩ '	
	7550 Blackberry Dr.			
	Naples Fi	L. 34114		
the clagent was/v	e limited liability company is not organized under the la hange or changes are made, the Florida street address o t will be identical. Or, in the case of a Florida limited I were authorized by an affirmative vote of the members rtigles of organization or the operating agreement of the	of the registered of iability company of the limited lia	office and the business office of the registered, it is hereby confirmed that the change(s) bility company or as otherwise provided in	
7	Betty Q. Tharky	1arkey 1		
Sign	nature of a member or authorized representative of a member		Printed or typed name of signee	
provi the oi to me notifi	reby accept the appointment as registered agent and agesions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address. It writing of this obange. Little Dance and the complete the com	ree to act in this performance of ed for in Chapter hereby confirm t	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed hat the limited liability company has been	