## 113000011421

(Requestor's Name)		
(Address)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Dusiness Littly Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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T. BROWN

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Boarding Solutions 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	g this matter to the following:	
David Voigt (Name of Person)	· ·	
Boarding Solutions LLC (Firm/Company)	· · · · · · · · · · · · · · · · · · ·	
42 Southwind Drive (Address)		
Englewood, Fl 34223 (City/State and Zip Code)		
For further information concerning this matter, please call:		
David Voigt (Name of Person)	at ( 941 ) 786-6224  (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 follow	ing amount:	
	☐ \$55 Filing Fee & Certified Copy	

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

Pursuant to the provisions of sections 608.416 or 605..., 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: Boarding Sc	olutions LLC	
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y: 42 Southwind Drive Englewood, FI 34223	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	42 Southwind Drive englewood , FI 34223	
1-23-2013  3. Date of filing/registration in Florida  5. (a) Registered Agent and Registered Office shown on	4. Document number  the records of the Florida Dept. of State: $\omega$	
Registered Agent:	USA RALLO SE SI	
Registered Office Address:	Sty Pridential Dr Dor Floor Dicksonville, FL 32207	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
NEW Registered Agent:	David Voigt	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	42 Southwind Drive Englewood p,FL 34223	
If the limited liability company is not organized under the that after the change or changes are made, the Florida stre office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles 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 comply with the provisions of all statutes relative to the plant familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified	et address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited of organization or the operating agreement of the	

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

(Signature of Registered Agent)