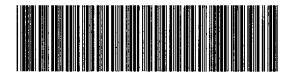
## L13000017538

(Requestor's Name)			
(Address)			
(Ad	ldress)		
(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	WAIT .	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificate	s of Status	
Special Instructions to Filing Officer:			

🐃 😁 Office Use Only



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 26, 2014

RON ELIOT DICHTER / BLUE DOG 1701 HWY A1A, SUITE 220 VERO BEACH, FL 32963 US

SUBJECT: BLUE DOG BUSINESS SERVICES, LLC

Ref. Number: L13000077538

We have received your document for BLUE DOG BUSINESS SERVICES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 614A00025132

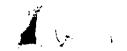
Carolyn Lewis
Regulatory Specialist II

www.sunbiz.org

## COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Blue Doy Business 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:			
Ron Eliot Dichter  Name of Person			
, I			
Blue Dog Firm/Company			
1701 Highway AIA, Suite 220			
Vero Beach, FL 32963  City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Ron Dichter at (772) 360-4646			
Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section  MAILING ADDRESS: Registration Section			
Division of Corporations Division of Corporations			
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314			
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301			
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. N	Name of the limited liability company: Business	Services
2. (a)	1701 Highway A1A, Svite 220 (b)	
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	Vero Beach, FL 32962	
:		
	(1-121-12	1 120
3.	Date of filing/registration in Florida 4.	L 3000077538
5. (a	D marks	Boodiness statistics
J. (a	Registered Agent and Registered Office shown on the records of the Florida Dept. of	
	1701 Highway AZA, suitezzo	1201 19th PL, A310 Vero Beach, FL 32960
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  Vers Beach	Vero Beach, Fi 32960
		<u> </u>
(b)		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:	DEC SIGNAL STREET
	1701 Highway A1A	
	NEW Registered Office Address:	PH PO
	Suite 220	ORATION
	Vero Beach, FL 32963	
If the	limited liability company is not organized under the laws of the State o	of Florida, it is hereby confirmed that after
the chagent	nange or changes are made, the Florida street address of the registered o will be identical. Or, in the case of a Florida limited liability company	office and the business office of the registered, it is hereby confirmed that the change(s)
was/v	vere authorized by an affirmative vote of the members of the limited lia ticles of organization or the operating agreement of the limited liability	bility company or as otherwise provided in company.
-	to tot	Printed or typed name of signee
I her	ehy accent the annointment as registered agent and agree to act in this	canacity. I further agree to comply with the
provis	sions of all statutes relative to the proper and complete performance of oligations of my position as registered agent as provided for in Chapter rely reflect a change in the registered office address, I hereby confirm to	my duties, and I am familiar with and accept 605, F.Ş. Or, if this document is being filed
notific	rely reflect a change in the registered office address, I hereby confirm ted in writing of this change.	ны не итнеа наонну company nas veen
Signat	ure of Registered Agent	