Calvert N. Courtney & Ass	0006338
4900 Manatee Av. W. Suite 101 Bradenton, FL 34209	5000047445452 -12/31/0101041016 ******25.00 ******25.00
CORPORATION NAME(S) & DOCU	Office Use Only
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NEW FILINGS	AMENDMENTS
<ul> <li>Profit</li> <li>Not for Profit</li> <li>Limited Liability</li> <li>Domestication</li> <li>Other</li> </ul>	<ul> <li>Amendment</li> <li>Resignation of R.A., Officer/Director</li> <li>Change of Registered Agent</li> <li>Dissolution/Withdrawal</li> <li>Merger</li> </ul>
OTHER FILINGS	<b>REGISTRATION/QUALIFICATION</b>
Annual Report Fictitious Name	<ul> <li>Foreign</li> <li>Limited Partnership</li> <li>Reinstatement</li> <li>Trademark</li> <li>Other</li> </ul>

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Sent By; WorkForce Solutions;

954-921-5023;

## 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. The name of the limited liability company is: Workforce Solutions VI, LLC

The mailing address of the limited liability company is ; \_\_\_\_\_\_\_

3.ž

4900 Manatee Avenue, West, Suite 101, Bradenton, FL 34209

October 4; 1999		L9900006338	
3. Date of filing/registration in Florida		 4. Document number	

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Corporate	Creations	Enterpri	ses, Inc.
warment of the second s	and the second		

941 4th Street, #200 Address Miami Beach, FL 33139 City, State and Zip

6. The name and address of the new registered agent and/or office:

Calve	ert N. Co	<u>ourtne</u>	<u>v</u>		
		Name	_		
4900	Manatee	Ave.,	W	Suite	101
Florida street address (P.O. Box NOT acceptable					

Bradenton	FL	34209
Cit	y. State an	d Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered effice and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited hability company.

authorized member or representative of a member Calvert N. Courtney

(Printed or typed name of signee)

I hereby accept the appointment us registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and Lan Jamiliar with and accept the obligations of inv position as registered agent as provided for in Chapter 608, F.S. Or, if this accument is being filed to merely reflect a change in the registered office independent of the provided for the company has been notified in writing of this change.

Bignature of Registered Ager Division of Corporations, P.O. Box 6327, Tallahassec, FL 32314

iNHS18(10/99)

**FILING FEE: \$25.00**