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**EXAMINER** 



## **FILING REQUEST**

September 29, 2011

## FLORIDA DEPARTMENT OF STATE

Type of Filing: CHANGE OF AGENT

Subject(s): **ESQUIRE LITIGATION SOLUTIONS, LLC** 

Form(s) Enclosed: STATEMENT OF CHANGE OF REGISTERED OFFICE / AGENT

Supporting Document(s): NONE

Check Enclosed: YES - CHECK# 37872 FOR \$25.00

Return Via: **REGULAR MAIL - SASE ATTACHED** 

Filing Method: **ASAP** 

PLEASE RETURN TO:

NRAI CORPORATE SERVICES 590 PARK STREET, SUITE 6

ST. PAUL, MN 55103

Please call me at 1-800-227-1256 if there are any questions. Thank you!

**Melissa Hobbs** 

## 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:	Esquire Litigation Solutions, LLC
2. (a) Principal office address of limited liability co	mpany: 2700 Centennial
(Note: MUST BE STREET ADDRESS)	101 Marietta Street Atlanta, GA 30303
(b) Mailing address of limited liability company:	4 Penn Center
(Note: MAY BE POST OFFICE BOX)	Suite 1250 Philadelphia, PA 19103
04/16/2006	
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	vn on the records of the Florida Dept. of State:
Registered Agent:	CT Corporation System
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324
(b) Enter name of <u>NEW Registered Agent</u> and/o	or NEW Registered Office address:  NRAI Services, Inc.
NEW Registered Agent:	515 East Park Avenue
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS	)
	Tallahassee ,FL32301
If the limited liability company is not organized unde 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 change of the members of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	the Florida street address of the registered office identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote otherwise provided in the articles of organization
Sue Johnson, Manager	
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 filed address, I hereby confirm that the limited liability co NRAI Services. Inc.	and agree to act in this capacity. I further agree to the proper and complete performance of my duties, my position as registered agent as provided for in to merely reflect a change in the registered office mpany has been notified in writing of this change.