

# M04000001556

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H10000016570 3)))



H100000165703ABCU

**Note: DO NOT** hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : BUSINESS FILINGS  
Account Number : 105256001620  
Phone : (608) 827-5300  
Fax Number : (608) 827-5501

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

## REGISTERED AGENT CHANGE IVCI, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

\$25.00

C. LEWIS

JAN 26 2010

EXAMINER

RECEIVED

10 JAN 25 PM 1:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H100000165703

# 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: IVCi, LLC

2. (a) Principal office address of limited liability company: 601 Old Willets Path



(Note: **MUST BE STREET ADDRESS**)

Hauppauge, NY 11788



(b) Mailing address of limited liability company:

601 Old Willets Path

(Note: **MAY BE POST OFFICE BOX**)

Hauppauge, NY 11788

4/23/2004

M04000001556

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

MCWHIRTER, STUART

Registered Office Address:

3631 CARUSO PLACE  
OVEIDO FL 32765

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent:

Business Filings Incorporated

**NEW** Registered Office Address:

1203 Governors Square Blvd, Suite 101

**(MUST BE FLORIDA STREET ADDRESS)**

Tallahassee, FL 32301-2960

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 office 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 liability company.

Signature of a member or authorized representative of a member

Robert Swing, Member

Printed or typed name of signer

I hereby accept the appointment as 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 I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Mark Williams, A.V.P., Business Filings Incorporated

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (05/08)

H100000165703

FILED  
JAN 25 AM 9:05  
CLERK OF STATE  
TALLAHASSEE, FLORIDA  
TOTAL P.02