

M06000001070

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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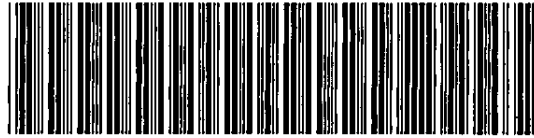
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 MAR 12 PM 2:06

J. BRYAN MAR 13 2007



Registered Agent Solutions, inc.

March 6, 2007

**VIA US REGULAR MAIL**

Florida Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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Re: **Integrated Compliance Solutions, L.L.C.**

Dear Sir or Madam:

On behalf of the above-referenced entity, enclosed please find the following for filing with the Florida Secretary of State:

- 1 One original (1) and one (1) copy of Change of Registered Agent/Address form;
- 2 \$25.00 to cover the required filing fee; and
- 3 A self-address, stamped envelope.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned in the enclosed envelope provided for your convenience.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (714) 434-7274

Respectfully,

REGISTERED AGENT SOLUTIONS, INC.

Alondra Navarro.

**the best value for Registered Agent services**

Corporate Mailing Address - 2900 Bristol Street - Suite D-202 - Costa Mesa - CA - 92626

• **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: Integrated Compliance Solutions, L.L.C.
2. The mailing address of the limited liability company is : 341 New Albany Road; Suite 140  
Moorestown, NJ 08057

02/17/2006

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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:

C T Corporation System

Name

1200 South Pine Island Road

Address

Plantation, FL 33324

City, State and Zip

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

Registered Agent Solutions, inc.

Name

155 Office Plaza Dr. Suite A

Florida street address (P.O. Box NOT acceptable)

Tallahassee FL 32301

City, State and 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 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.

John C. Saffronoff, Jr.  
(Signature of a member or authorized representative of a member)

John C. Saffronoff, Jr.  
(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.*

Alondra Navarrete  
(Signature of Registered Agent)

Alondra Navarrete  
Assistant Secretary,  
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

**FILING FEE: \$25.00**

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