## m06000003911

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## COVER LETTER

TO: Registration Section **Division of Corporations** Tylk Gustafson Reckers Wilson Andrews, LLC SUBJECT: 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: R REMP Name of Person Harbor Compliance Firm/Company 1830 Colonial Village Lane Address Lancaster, PA, 17601 City/State and Zip Code support@registeredagentsinc.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: R REMP 844-6897 Area Code & Daytime Telephone Number Name of Person **Mailing Address:** Street Address: **Registration Section** Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: ■ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy

## 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.

l. Na	ame of the limited liability company: Tylk Gustafson	Reckers	Wilson Andrew	rs, LLC	
2. (a)	600 W Van Buren St Ste 900		(b) 600 W Van Buren St Ste 900		
<b>.</b> (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	
	Chicago, IL 60607 - 3707		Chicago, II	. 60607 - 3707	
	07/07/2006		M06000003	911	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	CORPORATION SERVICE COMPANY				
. ()	Registered Agent and Registered Office shown on the records of 1201 HAYS STREET	of the Flo	rida Dept. of State		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			E 2024 APR SECRETA	
	TALLAHASSEE, H	FL_32301			
(b)	Registered Agents Inc				
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	NEW Registered Office Address:			-	
	7901 4th St N Ste 300			-	
	St. Petersburg	FL <sup>33702</sup>	2		
change agent v was/we the arti	imited liability company is not organized under the le or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members teles of organization or the operating agreement of the last of a member of a member of a member of a member of a member.	he regist liability s of the l ne limite 	ered office and company, it is imited liability d liability com on Andrews	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in apany.  Printed or typed name of signee	
provisi the obl to merc	by accept the appointment as registered agent and agions of all statutes relative to the proper and completing at the proper and completing at the proper and completing at the registered agent as provided in the registered office address, of in writing of this change.	gree to d te perfor led for i I hereby	nct in this capa mance of my a n Chapter 605, confirm that t	icity. I further agree to comply with the luties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been	
t	pavid Roberts re of Registered Agent				
Signatu	re of Registered Agent				

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