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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

G. MCLEOD

MAR - 1 2011

EXAMINER

COVER LETTER

Division of Corporations		
SUBJECT:Valua	ation Adv	visory Services, LLC
Name	of Limited	d Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	ed Office (Change and fee(s) are submitted for filing.
Please return all correspondence concern	ning this m	atter to the following:
Carra Duran		
Name of Person		
InCorp Services, Inc Firm/Company	·-	
23600 Corporate Circle, Su	uite 400	
Henderson, NV 89074-7	7722	
City/State and Zip Code		
carra.duran@incorp.co	om	
E-mail address: (to be used for future annual rep	ort notification	on)
For further information concerning this r	natter, ple	ase call:
Carra Duran	at	(800) 246-2677
Name of Person	<u> </u>	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
Clifton Building		P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301		Tallahassee, Florida 32314
Enclosed is a check for the follo	owing amo	ount:
\$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 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.

Name of the limited liability company:	Valuation Advisory Services, LLC
2. (a) Principal office address of limited liability co	ompany:
(Note: MUST BE STREET ADDRESS)	1271 Barclay Boulevard, Buffalo Grove
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	1271 Barclay Boulevard, Buffalo Grove
10/11/01/01	160089
12/11/2006	<u> </u>
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:	CORPORATION SERVICE COMPANY
Registered Office Address:	1201 HAYS STREET TALLAHASSEE FL 32301-2525
(b) Enter name of <u>NEW Registered Agent</u> and/o	or NEW Registered Office address:
NEW Registered Agent:	InCorp Services, Inc.
-	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	17888 67th Court North
IMOST BET BOILDITETABLE TIPOLISS	Loxahatchee ,FL 33470
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 char 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 or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company.	the laws of the State of Florida, it is hereby the Florida street address of the registered office identical. Or, in the case of a Florida finite innege(s) was/were authorized by an affirmative vote otherwise provided in the articles of formalization inpany.
David Danzig	
Printed or typed name of signee	RIDE ST
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of the Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability con	and agree to act in this capacity. I farther agree to he proper and complete performance of my duties, ny position as registered agent as provided for in to merely reflect a change in the registered office npany has been notified in writing of this change.
on behalf of InCorp Services, Inc.	
Signature of Registered Agent Division of Corporations, P.O. Bo	ox 6327. Tallahassee, FL 32314

FILING FEE: \$25.00