## M090000000646

(Red	questor's Name)	
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document.Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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OF SEP 25 AN ID: 53

T. HAMPTON

SEP 2 8 2009

EXAMINER

## COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Halcyon Consult Name of Limited	ing and Investments, LLC I Liability Compan	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office O	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
Jeffrey L. Hale  Name of Person  Halcyon Consulting and  Firm/Company	Investments, LLC	
1709A Gornto Rd # 333	<del></del>	
Valdosta, 6A 31601 City/State and Zip Code		
Email address: (to be used for future in tual report notification	<del>n</del> on)	
For further information concerning this matter, plea	ase call:	
Jeffrey L. Hale at (2)	229 <u>412-3024</u> Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	



September 22, 2009

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

**Dear Division of Corporations:** 

I am enclosing the following forms and associated filing fees for my company.

Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company

Resignation of Member, Managing Member or Manager from Florida or Foreign Limited Liability Company (for Willie Wade)

Resignation of Member, Managing Member or Manager from Florida or Foreign Limited-Liability Company (for Mary Cangelosi)

Application by Foreign Limited Liability Company to File Amendment to Application for Authorization to Transact Business in Florida

Please call me if you need any additional information.

Sincerely,

วีeffrey L. Hale

CentreMarc Consulting and Investments, LLC

1709A Gornto Rd #333

Valdosta, GA 31601

229-247-2102 Office

229-247-2112 Fax

229-412-3024 Cell

## 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: Halcyon	Consulting and Investments, LLC
2. (a) Principal office address of limited liability company	1 0 1 1 1 1 2
(Note: MUST BE STREET ADDRESS)	valdosta, GA 31601
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	Same
2/16/09	M0900000646
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:	Mary G. Cangelosi
Registered Office Address:	Mary G. Cangelosi 1160 Scenic Gulf Dr
	Miramar Beach, FL 32550
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	W Registered Office address:
NEW Registered Agent:	Jeffrey L. Hale
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1160 Scenic Gulf Dr.
(MUST BE TECKIDA STREET APPRESS)	Miramar Beach ,FL 32550
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	
Signature of a member or authorized representative of a member	_
Teffrey L. Hale  Printed or typed name of signee	- <del>-</del>
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proud I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I further arrest to oper and complete performance of the second stricts, sition as registered agent as proving a few rely reflect a change in the registered office y has been notified in writing of the change in the second s
Sensor of Legistered Legist	
Division of Corporations, P.O. Box 63 FILING FEE: \$	