

M09000002694

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

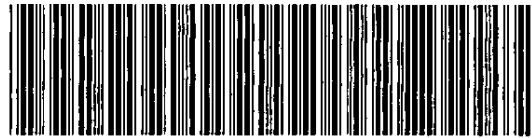
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN
AUG 10 2009
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 27, 2009

KELLY RAMSDEN
WAKELEE ASSOCIATES, LLC
27 LEGION DRIVE
BERGEFIELD, NJ 07621

SUBJECT: WAKELEE ASSOCIATES, LLC
Ref. Number: M09000002694

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TALLAHASSEE, FLORIDA

We have received your document for WAKELEE ASSOCIATES, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 809A00025607



National Construction Consultants ▲ General Contractors

Monday, July 20, 2009

Florida Division of Corporations
Registration / Qualification Section
Document # M090000007694
Attn: Joey Bryan 2

FILED
09 AUG -7 PM 4:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Mr. Bryan:

Wakelee Associates has to file for a new registered agent for the state of Florida.

Please see attached change of registered agent form for Wakelee Associates, LLC.

If you have any questions, please do not hesitate to contact the office.

Thank you,


Kelly Ramsden


JUL 27 2009

809A-25607

**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: Wakelee Associates, LLC

2. The mailing address of the limited liability company is : _____

27 Legion Drive, Bergenfield, NJ 07621

07/13/2009

M09000002694

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:

Ira Libanoff

Name

150 South Pine Island Road, Suite 400

Address

Plantation, FL 33324

City, State and Zip

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

NRAI Services, Inc.

Name

2731 Executive Park Drive, Suite 4

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

Weston

FL 33331

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.


(Signature of a member or authorized representative of a member)

Timothy Woods
(Printed or typed name of signee)

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)

Christian Eubanks - Asst. Secretary

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

FILING FEE: \$25.00

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