Division of Corporations Electronic Filing Cover Sheet

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Corporate Filing Menu

Help

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Y SULKER

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.

i. (a)	ONEINTERNATIONALBLVD	(b) Same		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	, , <u> </u>	Mailing address of limited liability company. (Note: MAY BE POST OFFICE BOX)	
	MAHWAII,NJ07495		(SON, MACOLIVATOLICE, BOX)	
	5/10/2010	M100000	02129	
	Date of filing/registration in Florida	4.	Document number	
. (a)	HATCHJOHNOESQ.			
, (a)	Registered Agent and Registered Office shown on the records of 1267BERKSHIRELANE, STE. 200	rate:		
	Registered Office Address (MUST BE FLORIDA STREET			
	TARPON SPRINGS . FI	L		
			- 76 D	
(b)	Enter name of NEW Registered Agent and/or NEW Registered		DEC.	
	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:	SSE NO	
	CTCorporationSystem			
	NEW Registered Office Address		50 60	
	1200SouthPinelslandRoad		_	
	1200SouthPinelslandRoad	L 33324		
ie chai gent w /as/we	Plantation , Florida street address of ill be identical. Or, in the case of a Florida limited live authorized by an affirmative vote of the members cles of organization or the operating agreement of the	tws of the State of Inf the registered officiability company, it of the limited liability company control in the limited liability control in the liability control in th	Florida, it is hereby confirmed that after ice and the business office of the register is hereby confirmed that the change(s) lity company or as otherwise provided in	
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se char gent we ras/we re artic Signate hereb rovision he obli mere otified	Plantation	iws of the State of I of the registered offi iability company, it of the limited liability companies limited liability companies Bell or the limited liability companies liability liability companies liability liability companies liability liability liability liability liability liability liability liabili	Florida, it is hereby confirmed that after ice and the business office of the register is hereby confirmed that the change(s) lity company or as otherwise provided in ompany. Printed or typed name of signee apacity. I further agree to comply with the y duties, and I am familiar with and access to the limited liability company has been	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00