M1200001767

(Requestor's	s Name)
(Address)	
(Address)	
(City/State/Z	ip/Phone #)
PICK-UP V	VAIT MAIL
(Business E	ntity Name)
(Document	Number)
Certified Copies Ce	ertificates of Status
Consist Instructions to Filing Of	
Special Instructions to Filing Of	ncer;

Office Use Only



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C. LEWIS

JAN 2 3 2013

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
CHURCH & COMPANY ADJUST	TING AND CONSULTING SERVICES, LLC
	f 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	g this matter to the following:
Diana Maldonado Name of Person	
Name of Person	
USRA	
Firm/Company	
11309 NW 44th Street	
Address	•
Coral Springs, FL 33065	
City/State and Zip Code	
dmaldonado@usregisteredagents.com	
E-mail address: (to be used for future annual report	t notification)
For further information concerning this ma	tter, please call:
Diana Maldonado	954 340-3375 at ()
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327
Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the follow	ing amount:
\$25 Filing Fee	C \$55 Filing Fee & Certified Conv

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: CHURCH &	COMPANY ADJUSTING AND CONSULTING SERVICE
2. (a) Principal office address of limited liability com	pany: 12000 AEROSPACE AVE, SUITE 110 HOUSTON TX 77034
(<u>Note: MUST BE STREET ADDRESS</u>)	HOUSTON 1X //034
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	12000 AEROSPACE AVE, SUITE 110 HOUSTON TX 77034
03/29/2012	M12000001767
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:	CT CORPORATION SYSTEM 2
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 US
	2
(b) Enter name of NEW Registered Agent and/or	ω · · · ·
<u> </u>	
NEW Registered Agent:	NRAI Services, Inc.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	515 East Park Avenue
	Tallahassee ,FL 32301
If the limited liability company is not organized under confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change the members of the limited liability company or as other operating agreement of the limited liability company.	he Florida street address of the registered office
Signature of a member of authorized representative of a member	
Printed or typed name of signed	
I hereby accept the appointment as registered agent a 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 his document is being filed to address, I hereby confirm that the limited liability comes in the confirm that the limited liability comes in the confirm that the limited liability comes is signature of Registered Agent Diana Machine Asst. Securior Division of Corporations, P.O. Bo	e proper and complete performance of my duties, y position as registered agent as provided for in o merely reflect a change in the registered office pany has been notified in writing of this change.

FILING FEE: \$25.00

INHS18 (05/08)