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JUN 28 2011

EXAMINER



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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Quicke Factor Name of Limited I	jability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
Maria Cealia Baggio Name of Person			
Fimi/Company			
51 SW JJH street #63	13		
MIAMI, FL 33130 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, pleas	e call:		
Name of Person) at ((86) 564-4207		
	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:			
\$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.

•	
1. Name of the limited liability company: Our cha	e Factory Online LLC
2. (a) Principal office address of limited liability compan	y:
(Note: MUST BE STREET ADDRESS)	51 SW JATH street #63.
(b) Mailing address of limited liability company:	4.2.4
(Note: MAY BE POST OFFICE BOX)	51 SW 1114 street #633
061)91201)	L 11000072013
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:	Leila Pinos
Registered Office Address:	DOB-0 1 FT 33148 COURT
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent: <u>NEW</u> Registered Office Address: <u>(MUST BE FLORIDA STREET ADDRESS)</u>	W Registered Office address: Maria Cewia Baggo 51 5W 111h street Att 637 M (2 mi ,FL 32130
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 iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Many a Cerua BACGIP Printed or typed name of signee	Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization y.
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pr and 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 compan	ngree to act in this capacity. I have a spree to so oper and complete performance of my suites, sition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.
Signature of Registered Agent	·