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COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: E- Commerce Enterprises, LLC

Name of 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 this matter to the following:

Matthew Thompson

Name of Person

Main Street Corporate Services, LLC

Firm/Company

1226 N. Tamiami Tr., STE 302

Address

Sarasota, FL 34236

City/State and Zip Code

info@mainstreetcorps.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew Thompson at 855 624-6462

Name of Person

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

2013 FEB -6 AM II: 40

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR 'BO'TH 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. Na	me of the limited liability company: E-Commerce Enterpris	ses, LLC			
2 (-)	Daineland affirm address of limited Helilitan community	4404 Diamond Circle Cost			
 (a) Principal office address of limited liability c (<u>Note: MUST BE STREET ADDRESS</u>) 		Sarasota, FL 34233			
(b) Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)		P.O. Box 295 Sarasota, FL 34230-0295			
	(170000 17777 222 1702 2017)				
12/16/2	011	L11000142009			
3. Da	te of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dep		~ 5	
	Registered Agent:	NRAI Services, Inc.	<u>罗///</u>	믋	
	Registered Office Address:	515 E. Park Avenue	CR AR	L.)	T
	registered Office Madress.	Tallahassee, FL 32301	3> ;;!	w	cre-
			SS	6	
			ui Ling	30 **	TY
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office addres	01	A	g a
	NEW Registered Agent:	Main Street Corporate Services, LLC		<u>:</u>	FAMILY TEST
	NEW Registered Office Address:	Main Street Corporate Services, LLC	154.	0	
MUST BE FLORIDA STREET ADDRESS		1226 N. Tamiami Tr., STE 302			
		Sarasota	_,FL <u>3</u>	4236	
confinand the	limited liability company is not organized under the limed that after the change or changes are made, the Flate business office of the registered agent will be identify company, it is hereby confirmed that the change(s) unbers of the limited liability company or as otherwise that the change of the limited liability company.	orida street address of the re- ical. Or, in the case of a Flor was/were authorized by an a	gistered ida lim ffirmat	l office ited ive vo	te of
	JOHN H. RAMSEY or typed name of signee	_			
I here comp and I Chap addre	eby accept the appointment as registered agent and a ly with the provisions of all statutes relative to the pro am familiar with and accept the obligations of my po- ter 608, F.S. Or, if this document is being filed to me sss, I hereby confirm that the limited liability company	gree to act in this capacity. In this capacity, in the performant of the performant is the performant of the performant is the performant of the performant in the performant of the performant in the performant	further see of movide provide gistere of this	r agre ly duti id for id offic chang	e to les, in ce ce ge.

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

Signature of Registered Agent