BUULLOTLO L

(Requestor's Name)	
(Address)	800304132908
(Address)	
(City/State/Zip/Phone #)	
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TO: .. Registration Section

INHS18 (2/14)

Divi	sion of Corporations			
SUBJECT:	MASTRIANNI INTERACTIV	/E LLC (L1300	0066762)	
SOIDLET.	Name of Limited Liability Company			
Dear Sir or N	Madam:			
The enclosed	d Registered Agent/Registered Of	fice Change and fe	ee(s) are submitted for filing.	
Please return	all correspondence concerning th	nis matter to the fo	ollowing:	
DINO S. M	MASTRIANNI JR.			
	Name of Person		-	
MASTRIA	NNI INTERACTIVE LLC			
	Firm/Company		-	
225 MUR	CIA DRIVE APT 110			
	Address		-	
JUPITER,	2759 FL 33458 - 200			
	City/State and Zip Code		-	
N/A				
E-mail	address: (to be used for future and	nual report notific	ation)	
For further in	nformation concerning this matter	, please call:		
DINO S. M	IASTRIANNI JR.	561 at (310-3897 (CELL)	
7	Name of Person	· ·	Area Code & Daytime Telephone Number	
STR	REET/COURIER ADDRESS:	MAI	LING ADDRESS:	
	stration Section	_	stration Section	
	sion of Corporations		sion of Corporations	
	on Building		Box 6327	
	Executive Center Circle ahassee, Florida 32301	Talla	hassee, Florida 32314	
	losed is a check for the following	g amount:		
□ \$2	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 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. Na	me of the limited liability company: MASTRIANN	IINIE	TERACTIVE LLC
2. (a)	225 MURCIA DRIVE		(b) 225 MURCIA DRIVE
(/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	APT 110		APT 110
	JUPITER, FL 33458-2759		JUPITER, FL 33458-2759
	05/07/2013		L13000066762
3.	Date of filing/registration in Florida	4.	Document number
i. (a)	DINO S. MASTRIANNI JR.		
,. (a)	Registered Agent and Registered Office shown on the records of	the Flori	orida Dept. of State:
	3257 É MALLORY BLVD		
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRES	(ESS)
			201
	JUPITER	33458	58-8786
	, FI	·	
(b)	DINO S. MASTRIANNI JR.		
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	e address:
	225 MURCIA DRIVE		
	NEW Registered Office Address:		
	APT 110		
	JUPITER	33458	58-2759
he cha gent v vas/we he arti Signat	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the ture of a member or authorized representative of a member oby accept the appointment as registered agent and agricultures of all statutes relative to the proper and complete igations of my position as registered agent as provide the reflect a change in the registered office address. I	the regability of the lilimited	registered office and the business office of the registery company, it is hereby confirmed that the change(s) limited liability company or as otherwise provided red liability company. DINO S. MASTRIANNI JR. Printed or typed name of signce

Signature of Registered Agent