L01000015099

Creech
380 S. State Road 434

#1004-200
Altamonte Springs, Florida 32714

City/State/Zip Phone #

100005600111--7 -05/23/02--01061--002 *****25.00 ******25.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1		
(Corporation Name)	(Document #)	FILE
Corporation Name)	(Document #)	FILED WILL 27
(Corporation Name)	(Document #)	
4. (Corporation Name)	(Document #)	<u></u> :
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Certified Copy Photocopy Certificate of Status	-
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	
OTHER FILINGS	REGISTRATION/QUALIFICATION	, <u>-</u>
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other	

Examiner's Initials

J. BRYAN MAY 3 1 2002

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. The name of the limited liability company is: <u>STREAM ONE</u> , <u>LLC</u>
2. The mailing address of the limited liability company is: 380 5. 5tale Rd. 434
Suite 1004-200 Altemonte Springs, Fc. 32714
Sept. 5, 2001 L01000015099
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Corporation Service Company Name
Corporation Service Company Name 1201 Hays Street Address Tallahessee, FL. 32301 City, State and Zip 6. The name and address of the new registered agent and/or office: CHAD CREECH
6. The name and address of the new registered agent and/or office:
Name 380 5. State Rd 434 Ste 1004-200 Florida street address (P.O. Box NOT acceptable) Alternate Springs FL 32714 City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member)
CHAD CREECH
(Printed or typed name of signee)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 618, F.S. Or, if this document is being filed to merely reflect a change in the registered office address f hereby confirm that the limited liability company has been notified in writing of this change.
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)

FILING FEE: \$25.00