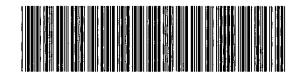
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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	· · · · · · · · · · · · · · · · · · ·

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T. HAMPTON

FEB 1 2 2009

EXAMINER

February 4, 2009

VIA US REGULAR MAIL

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: Moniker Online Services, LLC

Dear Sir or Madam:

On behalf of the above-referenced entity, enclosed please find the following for filing with the Florida Secretary of State:

- 1 One original (1) and one (1) copy of Change of Registered Agent/Address form;
- 2 \$35.00 to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (512) 480-9131.

Respectfully,

REGISTERED AGENT SOLUTIONS, INC.

Leana Guzman

Registered Agent Solutions, Inc. 515 Congress Avenue

Suite 2300

Austin, TX 78701

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: Monike	er Online Services, LLC	
2. (a) Principal office address of limited liability co (Note: MUST BE STREET ADDRESS)	mpany: 20 SW 27th Avenue, Suite 201 Pompano Beach, FL33069	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	20 SW 27th Avenue, Suite 201 Pompano Beach, FL33069	
06/28/02 3. Date of filing/registration in Florida	L02000016399 4. Document number	
5. (a) Registered Agent and Registered Office show	wn on the records of the Florida Dept. of State:	
Registered Agent:	Magolnick, Joel S Esq.	
Registered Office Address:	c/o De La O, Marko, Magolnick & Leyton PA 3001 SW 3 Avenue Miami, FL 33129]
(b) Enter name of NEW Registered Agent and/o	or NEW Registered Office address:	
NEW Registered Agent:	Registered Agent Solutions, Inc.	+
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS	155 Office Plaza Dr. Suite A Tallahassee ,FL 32301	Œ
that after the change or changes are made, the Florid	er the laws of the State of Florida, it is hereby confirmed a street address of the registered office and the business in the case of a Florida limited liability company, it is rized by an affirmative vote of the members of the limited icles of organization or the operating agreement of the	
(Signature of a Member or authorized representative of a member)		
Tod Oreene (Printed or typed name of signee)	· 	
couply with the provisions of all statutes relative to	t and agree to act in this capacity. 'I further agree to the proper and complete performance of my duties, and I position as registered agent as provided for in Chapter 662, lect a change in the registered office address, I hereby contified in writing of this change.	
•	D. Box 6327, Tallahassee, FL 32314 G FEE: \$25.00 REFER: \$25.00	֖֓֞֟֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֟֝֟֝֟֓֓֟֟ ֓֞֞֞֞֞֞֞֞֞֞֞֞֞
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