L030000000H

(Requestor's Name)						
(Address)						
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PICK-UP WAIT	MAIL					
(Business Entity Name)						
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJI	ECT: A	sian C	Confusion LLC.	
		Limited	d Liability Company	
Dear S	Sir or Madam:			
The en	closed Registered Agent/Registered	Office (Change and fee(s) are submitted for filing.	,
Please	return all correspondence concerning	this m	natter to the following:	
			·	
	Pet Brown			
	Name of Person	,, ,. ,,		
	Anion Confusion III C			
	Asian Confusion, LLC. Firm/Company			
	1 and Company			
	4217 Saltwater Blvd.			
	Address			
Tampa, FL 33615				
	City/State and Zip Code			
	petta@earthlink.net mail address: (to be used for future annual report		· · · · · · · · · · · · · · · · · · ·	
E-mail address: (to be used for future annual report notification)				
For fu	rther information concerning this mat	ter, plea	ase call:	
	· ·	, ,		
	Pet Brown		407 \ 620 9925	
	Name of Person	at (407) 620-8835 Area Code & Daytime Telephone Number	
	Name of Pelasi		. How could be say time to the product it was a	
	STREET/COURIER ADDRESS:		MAILING ADDRESS:	
	Registration Section		Registration Section	
	Division of Corporations		Division of Corporations	
	Clifton Building		P.O. Box 6327	
	2661 Executive Center Circle		Tallahassee, Florida 32314	
	Tallahassee, Florida 32301			
Enclosed is a check for the following amount:				
ĺ	C/\$25 Filing Fee	-	S55 Filing Fee & Contified Com-	
	\$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:	Asian Confusion, LLC,			
2. (a) Principal office address of limited liability company:				
(Note: MUST BE STREET ADDRESS)	4217 Saltwater Blvd. Tampa, FL 33615			
(b) Mailing address of limited liability company:				
(Note: MAY BE POST OFFICE BOX)	4217 Saltwater Blvd. Tampa, FL 33615			
1/17/2003	L0300002004			
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:	Cathcart, Christopher C			
Registered Office Address:	2699 Lee Road, Suite 101 Winter Park, FL 32789			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> : NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	W Registered Office address: Cathcart, Christopher C 2699 Lee Road, Suite 101			
[MOST DD 120100110111111111111111111111111111	Winter Park ,FL 32789			
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 Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacited Trurmer 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 of S. F. S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. Signature of Registered Agent				