FILED
Mar 06, 2008 8:00 am
Secretary of State

1/18/2

01-18-2008 90016 020 ***138.75

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000007058

1. Entity Name
ADVANCE MEDIA DEPOT, LLC

30001365

Principal Place of Business	Mailing Address
105 COMMERCE STREET SUITE 125 LAKE MARY, FL 32746	105 COMMERCE STREET SUITE 125 LAKE MARY, FL 32746
2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

01072008 Chg-LLC CR2E063 (12/06)

4. FEI Number
20-0663598
Applied For
Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COLLINS, NANCY J 105 COMMERCE STREET SUITE 125 LAKE MARY, FL 32746	Name: Ryan Wendt Street Address (P.O. Box Number is Not Acceptable): 105 Commerce Street Suite 125 City: Lake Mary FL Zip Code 32746

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Ryan Wendt 1/7/2008
Signature, typed or printed name of registered agent and title if applicable DATE
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES COLLINS, NANCY J 105 COMMERCE STREET, SUITE 125 LAKE MARY, FL 32746	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGER Wendt, Ryan 105 commerce ST, STE 125 Lake Mary, FL 32746	☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Ryan Wendt 1/4/2008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

01/07/2008 14:53 18596964737 AMERICAN RECORDABLE PAGE 01/01

01/07/2008 18:18 FAX 8007888436 ADVANCE MEDIA DEPOT 001