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2006 AUG 21 PH 12: 52 SECRETARY OF STATE TALL AHASSEE, FLORIDA

W-3475

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Name of Lin	nited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted	d for filing.
Please return all correspondence concerning the	is matter to the following:	
Mark Milburn (Name of Person)		2006 AUG 21 SECRETAR TALLAHAS
Mark One UC (Firm/Company)		55.7
4638 Segret Riv. (Address)	er rail	PM 12: 52 OF STATE EE. FLORIDA
Port Orange, FC (City/State and 2th Code)	PG166	
For further information concerning this matter,	, please call:	
(Name of Person)	(Area Code & Daytime	Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following		
\$25 Filing Fee	\$55 Filing Fee & Certified	d Copy
/ INHS18 (8/05)		

* 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: Mark One LLC
2. The mailing address of the limited liability company is: 4638 Secret River Train
Port Grange, FC 32129
5.21-04 6000038775
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: Friebis, Daniel S. Name 3890 Turkle Greek Dr. Ste B Address Port Gange Fc 3212 City, State and Zip
6. The name and address of the new registered agent and/or office:
Mark Milburn Valor Name Valor Normal Florida street address (P.O. Box NOT acceptable) Port Orange FL 32129 City, State and Zip Property Control of the
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 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 608, 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.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

(Signature of Registered Agent)