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2005 AUG 25 A 10: 19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: The Marketing Department LLC (Name of corporation)					
DOCUMENT NUMBER:					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Shari Palasti (Name of contact person) The Marketing Department LLC (Firm/Company)					
2802 Samara Drive Williams					
(Address)					
Tompa, FL 33618 Tompa, FL 33618 TOTAL TO THE SECOND TO T					
For further information concerning this matter, please call:					
Chair Delacti					
(Name of contact person) at (813) (47) (Area code & daytime telephone number)					

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR (しょし)

statement of char	rovisions of sections (608 H) nge is submitted for a LCC in	ganized under the laws of the	e State of Florida			
	to change its registered office or reg					
1. The name of the LC The marketing Department LC						
1. The name of the LC The marketing Department LLC 2. The principal office address: 2802 Samara Drive, Tampa, FL 33418						
<u> </u>						
3. The mailing ac	ldress (if different):					
4. Date of incorp	oration/qualification:	Document number:	L 05000055710			
	street address of the current registere					
	Hank Williams					
	4915 W.Cui	27PSS #100	 			
	Tour El	33607				
	•					
6. The name and (if changed):	street address of the new registered	agent (if changed) and /or reg	ristered office			
(-	Shari Palast	, i	ECR			
	2802 Samar		AUG 2			
	(P.O. Box NOT accep		m S			
	Tampa FL	33618	F ST D			
The street addre	ss of its registered office and the str be identical.	reet address of the business	office of its registered agent,			
	s authorized by resolution duly ado e board, or the corporation has been	opted by its board of director in notified in writing of the c	s or by an officer so hange.			
- Signatu	re of an officer or director)	Shan (Printed or typ	Palasti ped name and title)			
I hereby accept I further agree t of my duties, and document is bein corporation has	the appointment as registered agent o comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change i been notified in writing of this cha	t and agree to act in this ca statutes relative to the prop obligation of my position as in the registered office addre nge.	pacity, er and complete performance s registered agent. Or, if this ess, I hereby confirm that the			
	NULL nature of Registered Agent)	7/10/05	rate)			
If signing on bel	5	(-	•			
(T)	yped or Printed Name)					

* * * FILING FEE: \$35.00 * * *