## L05000115870

(Requestor's Name)	
(Address)	
(	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
(Social Marine Marine)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





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SECKE LASSEE, FLORID



American Incorporators LTD

1220 N. Market Street, Suite 808
Wilmington, DE 1980I
(302) 421 5752
(300) 421 2661
(302) 421 5753 [fax]
info@ailcorp.com
www.ailcorp.com

December 8, 2005

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FF 32314

RE: StraightTalk Marketing, LLC

Dear Sir/Madam:

Please find enclosed one Statement of Change for the above referenced company. Please find enclosed our check in the amount of \$25 to cover the filing fees on an expedited basis.

Please file and return the filed documents to me via regular mail to American Incorporators, Ltd., at 1220 N. Market Street, Suite 808 Wilmington DE 19801, Attn: Jeff Tindall.

Thank you for your assistance. Please contact me if you have any questions.

Sincerely,

Jeff Tindall Account Manger

Enc.

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: StraightTalk Marketing, LLC (Name of Limited Liability Company)		
Dear Sir or Madam:		
The enclosed Registered Agent/Register	ed Office Change and fee(s) are submitted for filing.	
Please return all correspondence concern	ning this matter to the following:	
Jeff Tindall		
(Name of Person)		
American Incorporators, Ltd.  (Firm/Company)		
1220 N. Market St., Suite 808,	·	
(Address)		
Wilmington, DE 19081		
(City/State and Zip Code)		
For further information concerning this n	natter, please call:	
Jeff Tindall	at ( 302 ) 421-5752	
(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 follo	wing amount:	
\$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. The name of the limited liability company is: StraightTalk Marketing, LLC 2. The mailing address of the limited fishility company is: 205 Green Lake Circle, Longwood, FL 32779 12/05/05 L05000115870 Date of filing/registration in Florida 4. Document number The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Florida Filing & Search Services, Inc. Name 1333 North Duval Street Address Tallahassee, FL 32303 City, State and Zip 6. The name and address of the new registered agent and/or office: Betty Harper Name 205 Green Lake Circl Florida street address (P.O. Box NOT acceptable) Longwood FL 32779 City, State and Zip 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 melaher or authorized representative of a member) Betty Harper, Member (Printed or typed name of signer) 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, Talishansee, FL 32314

INHS18 (8/05)