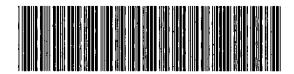
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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Pusiners Entity Name)		
(Business Entity Name)		
(Document Number)		
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## · COVER LETTER

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Division of Corporations	
SUBJECT: Alachua Marketing & Pro	omotions
(Name o	f Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing.
Please return all correspondence concerning t	this matter to the following:
Brie Tyler Guynn	
(Name of Person)	
Alachua Marketing & Promotions	
(Firm/Company)	
14911 Main Street Suite C	
(Address)	
Alachua, Florida 32615 (City/State and Zip Code)	
(Chyrstate and Zip Code)	
For further information concerning this matte	er, please call:
Brie Tyler Guynn	at ( 386 ) 462-1333
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations P.O. Box 6327
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	i ananassee, i fonda 32314
Enclosed is a check for the following	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

TO: Registration Section

## 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: Alachua	Marketing & Promotions, LLC
2. (a) Principal office address of limited liability comparison (Note: MUST BE STREET ADDRESS)	
,	Alachua, Florida 32615
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	14911 Main Street
	Alachua, Florida 32615
	TAISE 08
9/01/2006	L06000085377
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown	n on the records of the Florida Dept. of State:
Registered Agent:	Jeffery B Guynn
Registered Office Address:	15281 NW US Highway 441
	Suite 20 Alachua, FL 32615
NEW Registered Agent:	Brie Tyler Guynn
<b>NEW</b> Registered Office Address:	14911 Main Street
(MUST BE FLORIDA STREET ADDRESS)	Suite C
	Alachua,FL_32615
that after the change or changes are made, the Florida office of the registered agent will be identical. Or, in t	the laws of the State of Florida, it is hereby confirmed street address of the registered office and the business the case of a Florida limited liability company, it is zed by an affirmative vote of the members of the limited les of organization or the operating agreement of the
Brie Tyler Guynn (Printed or typed name of signee)  Brie Tyler Guynn (Printed or typed name of signee)	
I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my post F.S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been not	and agree to act in this capacity. I further agree to be proper and complete performance of my duties, and I lition as registered agent as provided for in Chapter 608, ct a change in the registered office address, I hereby tified in writing of this change.
(Signature of Registered Agent)	

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