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COVER LETTER TO: Registration Section Division of Corporations Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Daol. com For further information concerning/this matter, please call: Area Code & Davtime Telephone Number STREET/COURIER ADDRESS: MAILING ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

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

Enclosed is a check for the following 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 608.50 liability company submits the following statement in order agent, or both, in the State of Florida.	08, Florida Statutes, the undersigned limited r to change its registered office or registered
1. Name of the limited liability company:	den Image Services LLC
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	1100 North John Young Pkwy Kissirrance Fl 34741
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	P.O. Box 151 Roseland + 32957
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t Registered Agent: Registered Office Address:	he records of the Florida Dept. of State: 5 TT JULIO NIEUES Z 10305 Rusela & 2000 Rosetano H 32157
(b) Enter name of NEW Registered Agent and/or NEV	V Registered Office address:
NEW Registered Agent:	Julio Nieves
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Kissimmee FL 34741.
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Fle and the business office of the registered agent will be identi- liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company.	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote of
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 accomply with the provisions of all statutes relative to the proand I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
Signature of Registered Agent	

INHS18 (05/08)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314