## 106000112611

(Re	equestor's Name)	
( <b>A</b> d	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	e) .
: (Dc	ocument Number)	:
Certified Copies	_· Certificates	of Status :
Special Instructions to Filing Officer:		
·		

Office Use Only

G. MCLEOD

JUL 21 2009

**EXAMINER** 



500158537375

07/20/09--01005--013 \*\*25.00

JUL 60

JUL 20 #1111: 0

ALCOURT SECULATION AS NOISING SECULATION AS A SECULATION OF SECURATION OF SECULATION OF SECULATION OF SECULATION OF SECULATION OF SECURATION O

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Tampa Bay Digital Design Experts UC  Name of Limited Liability Company			
Name of Limited Liability Company			
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:			
LEE A. STEWART Name of Person			
TAMPA BAY DIGITAL DELIGN EXPERTS, LLC Firm/Company			
31177 U.S. 17WY 19 N. 4104 Address			
PAIM HARBOR FC 34684  City/State and Zip Code			
5 alnayr 30 D yahoo. C.c.m E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
LEE STEWART at (727) 916-8533			
Name of Person at (72+) 976-03-)  Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: MAILING ADDRESS:			
Registration Section Registration Section			
Division of Corporations Division of Corporations			
Clifton Building P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301			
Enclosed is a check for the following amount:			
\$25 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. Name of the limited liability company: Trupa B	A DIGITAL DESIGN EXPERTS LLC
2. (a) Principal office address of limited liability company	
(Note: MUST BE STREET ADDRESS)	PALM HARBOR, FL 34684
(b) Mailing address of limited liability company:	SAME US A BOVE
(Note: MAY BE POST OFFICE BOX)	
Nov. 21, 2006	L06000112611
3. Date of filing/reg/stration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	<u> </u>
Registered Agent:	Corporation Service Company
Registered Office Address:	(Separation Service Company) 1201 HAYS ST. TAUATHASSEC, FL 32301
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	<b>≒</b> ⊇∺
NEW Registered Agent:	, ,,,,
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	PACM HAMBOR, FLD 34684
If the limited liability company is not organized under the confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	laws of the State of Florida, it is hereby lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization
LEE A. STEWART	
Printed or typed name of signee	-
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the province and I am familiar with and accept the obligations of my pochapter 608, F.S. Of If this document is being filed to meaddress, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office whas been notified in writing of this change.
Signature of Registered Agent	

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