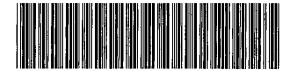
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(Re	equestor's Name)	
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Certified Copies	_ Certificate:	s of Status
Special Instructions to Filing Officer:		
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2007 JUN 12 PM 2: 4U SECRETARY OF STATE TALL MHASSFE, FLORIDA

TILEU 101 JUN 12 PN 2:

## **COVER LETTER**

Division of Corporations		
SUBJECT: DisputeSuite.com, LLC	Limited Liability Company)	
(Name of	Elimica Elability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
Mr. Brett Ryckman		
(Name of Person)	<del></del>	
DisputeSuite.com, LLC		
(Firm/Company)	<del></del>	
•		
4644 West Gandy Blvd., Ste. 4-117		
(Address)	· · · · · · · · · · · · · · · · · · ·	
Tampa, FL 33611		
(City/State and Zip Code)	· · · · · · · · · · · · · · · · · · ·	
For further information concerning this ma	tter, please call:	
_	•	
Brett Ryckman	at (813 ) 412-0406	
(Name of Person)	(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	ing 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: DisputeSuite.com, LLC 2. The mailing address of the limited liability company is: 4644 West Gandy Blvd., Ste. 4-117, Tampa, FL 33611 L07000038763 04/11/2007 4. Document number 3. Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Brett Ryckman Name 5000 Culbreath Key Way #8125 Address Tampa, FL 33611 City, State and Zip 6. The name and address of the new registered agent and/or office: **Brett Ryckman** Name 4644 West Gandy Blvd., Ste. 4-117 Florida street address (P.O. Box NOT acceptable) Tampa, FL 33611 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 member or authorized representative of a member)

Brett Ryckman, Managing Member

(Printed or typed name of signee)

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.

(Signature of Registered Agent)