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SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Bardo M. COM LL (Name of Limited Liability)	Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and	I fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	following:
David M. Adler (Name of Person) Registered Agent (Firm/Company)	
1107 Key Plaza #300	
Key Wash FL 33040 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Scott Whosh at (305) (Name of Person) (Are	294-4766 ea Code & Daytime Telephone Number
Registration Section Registra Division of Corporations Division Clifton Building P.O. Bo	NG ADDRESS: ation Section of Corporations x 6327 ssee, Florida 32314

☐ \$55 Filing Fee & Certified Copy

Tallahassee, Florida 32301

\$25 Filing Fee

Enclosed is a check for the following amount:

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.

2 1 1
1. The name of the limited liability company is: Bardom. com, LLC
2. The mailing address of the limited liability company is: 1107 Key Plaza, #300
Key need FL 33040
May 3, 2007 L070000 47226
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: David Addess
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) (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 auties, 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, Tallahassee, FL 32314 FILING FEE: \$25.00

(Signature of Registered Agent)