107000053976

(Requ	uestor's Name)				
(Addı	ress)				
(Addı	ress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	s of Status			
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O9 JUN -8 AMII: 19
SECRETARY OF STATE
ALL AHASSEE, FLORIDA

D. BRUCE
JUN 0 9 2009
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations					
SUB			Graphics, LI			
	rume of	Dimino	. Diaomity Con	.pu,		
Dear	Sir or Madam:					
The e	enclosed Registered Agent/Registered	Office (Change and fee	e(s) are submitted for	or filing.	
Pleas	e return all correspondence concernin	g this m	atter to the foll	lowing:		
	Keith Ford					
	Name of Person					
	Rhino Graphics, LLC					
	Firm/Company				SEC ALL	
	1428 Travelers Palm Drive SSR				JUN -8 AMII: 19 CRETARY OF STATE LAHASSEE, FLORID	-
	Address				E O A	Ī
	Edgewater, FL 32132				STAT FLORI	•
	City/State and Zip Code				DA 3	
	Rhino C. CFI, Com E-mail address: (to be used for future annual repor	t notificati	on)			
For f	urther information concerning this ma	itter, ple	ase call:			
	Keith Ford	at (386)	566-4338		
	Name of Person	_ `-	Area Cod	e & Daytime Telephone N	Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Registration Division of P.O. Box 63	Corporations		
	Enclosed is a check for the follow	ing am	ount:			
	\$25 Filing Fee		\$55 Filing	g Fee & Certified C	Сору	

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:	Rhino Graphics, LLC			
2. (a) Principal office address of limited liability company	y: 1428 Travelers Palm Dr.			
(Note: MUST BE STREET ADDRESS)	Edgewater, FL 32132			
(b) Mailing address of limited liability company:	Same as above			
(Note: MAY BE POST OFFICE BOX)				
5/21/2007	L07000053976			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:			
Registered Agent:	Friebis, Daniel S.			
Registered Office Address:	3890 Turtle Creek Dr., Suite B Port Orange, FL 32127 上京 6			
(b) Enter name of NEW Registered Agent and/or NEW	m			
<u>NEW</u> Registered Agent:	Keith Ford			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1428 Travelers Palm Drive A			
	Edgewater ,FL32132			
If the limited liability company is not organized under the liconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability 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	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote			
Keith Ford	-			
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 provided and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men 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.			

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