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(Daminated Name)
(Requestor's Name)
(Address)
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,
(Business Entity Name)
(Document Number)
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2009 JUL -7 AM 11: 05 SECRETARY OF STATE

T. CLINE

JUL -8 2009

EXAMINER

COVER LETTER

SUBJECT: P. R. D. FFUSION L. L. C. 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:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
PLANET AWNA Name of Person P. R. DIFFUSION LLC Firm/Company 3250 W. RAY HARBOR DA # 3 MARBOR DA Address Address Address Address City/State and Zip Code A N N A. PLANET & Yehoo. FR E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
at () Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount: [V] \$25 Filing Fee.

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. liability company submits the following statement in ordagent, or both, in the State of Florida.	der to change its registered office or registered
1. Name of the limited liability company: $\int \mathcal{R}$	DIFFUSION- le
2. (a) Principal office address of limited liability compar	ny: Mul Lincoln Road
(Note: MUST BE STREET ADDRESS)	I 400 - M. A Mi. BEACH
(b) Mailing address of limited liability company:	33159- FLORIOA
(Note: MAY BE POST OFFICE BOX)	
	L07000059095
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept. of State:
Registered Agent:	Patrick Birth
Registered Office Address:	Dania, H 320043
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	EW Registered Office address:
NEW Registered Agent:	9250 W BAY HARBOR DZ
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	# 3A-
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be ider liability company, it is hereby confirmed that the change of the members of the limited liability company or as other the operating agreement of the limited liability compans	Florida street address of the registered office ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization
Signature of a member or authorized representative of a member	
PLANET ANNA Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pi and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address, I hereby confirm that the limited liability compan	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office ny has been notified in writing of this change.
Q- A-8	·

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