

(Re	equestor's Name)	······································
(Ac	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	.Certificates	of Status
Special Instructions to	Filing Officer:	

G. MCLEQD,

NOV - 5 2009

EXAMINER



600162197056

11/04/09--01021--017 **25.00

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MAC Photo Designs, LLC	
	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:
Claudia Lucas	
(Name of Person)	
MAC Photo Designs, LLC (Firm/Company)	
(Firm/Company)	
15326 Cortona Way	
(Address)	
Naples, FL 34120	
(City/State and Zip Code)	
For further information concerning this matt	er, please call:
Claudia Lucas	at 239 348 8640
(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 P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following	ng 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. Name of the limited liability company: MAC Photo Des	igns, LLC	•
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: 15326 Cortona Way Naples, FL 34120	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	15326 Cortona Way	•
	Naples, FL 34120	
June 25, 2007 (Original Gling Date)	L07000067156	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	SmallBiz Agents, LLC	
Registered Office Address:	4244 W. Tennessee St., #185	NO
	Tallahassee FL 32304	SECK SECK
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:	400 m
NEW Registered Agent:	Claudia Lucas	
NEW Registered Office Address:	15326 Cortona Way	S IAI
(MUST BE FLORIDA STREET ADDRESS)	Naples ,FL 34120	m
If the limited liability company is not organized under the that after the change or changes are made, the Florida stre office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member) Melissa Dziabo (Printed or typed name of signee)	et address of the registered office and the busin case of a Florida limited liability company, it is by an affirmative vote of the members of the lin of organization or the operating agreement of the	ness mited ne
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pram familiar with and accept the obligations of my position F.S. Or if this document is being filed to merely reflect a confirm that the limited liability company has been notified.	agree to act in this capacity. I further agree to roper and complete performance of my duties, as registered agent as provided for in Chapte, change in the registered office address, I herely discussions of this change.	and I r 608, by

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

(Signature of Registered Agent)