L070000111531

(Requestor's Name)		
(Address)		
(Address)		
` ,		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



900132005239

07/02/08--01022--010 **25.00

SEGRETARY OF STATE

Market State of State

T. CLINE

JUL - 3 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Leads - To - toy, Com "LLC" (Name of Limited Liability Company)	у)
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:	
Carrie Wilkersm (Name of Person) Leads-to. boy. Cam "LLC" (Film/Company) 957 39th Corr (Address) West Palm Reach FL 33407 (City/State and Zip Code)	THE JUL -2 AMIO: 52 SEPRETARY OF STATE TALLAHASSEE, FLORIDA
For further information concerning this matter, please call:	` ^
Carrie Dilkerson at (561) 881- (Name of Person) (Area Code & Daytim	7785 ne Telephone Number)
STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Clifton Building P.O. Box 6327	n

Tallahassee, Florida 32314

☐ \$55 Filing Fee & Certified Copy

INHS18 (5/08)

2661 Executive Center Circle

Enclosed is a check for the following amount:

Tallahassee, Florida 32301

\$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 608.508, 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.

in the State of Frontau.	
1. Name of the limited liability company:	- to-toy, Com "LLC"
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	West Palm Beau, FL 3367
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1957 739th Corr West Palm Black, FC 33407
11/05/2007 3. Date of filing/registration in Florida	L07000111 5-31
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	Brent W. Wilkerson
Registered Office Address:	457 39th Cou-T West Fulm Beach, 1-633407
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	V Registered Office address:
NEW Registered Agent:	Carrie Wilkerson
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	West Palm Beau, FL 3 19407
If the limited liability company is not organized under the lathat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cahereby confirmed that the change(s) was/were authorized bliability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	t address of the registered office and the business are of a Florida limited liability company, it is
Carrie Wilkerson	
(Printed or typed name of signee)	-
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proam 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 hiability company has been notified	gree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.
(Signature of Registered Agent)	

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