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Special Instructions to Filing Officer:			
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EXAMINER

CORPORATE ACCESS,

"When you need ACCESS to the world"

INC. 236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

(850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

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¥	FILING	Change of RA 3	
•		ST. ST.	
1.	Cyberspace +	Change of RA 230 lead quarters, LLC 68-1236	
	(CORPORATE NAME AND DOCU	MENT #) /	
2.	(CORPORATE NAME AND DOCU	MEN'Γ #)	
3.			
.	(CORPORATE NAME AND DOCU	MEN'Γ #)	
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SPECIAL INSTRUCTIONS:			

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: CYBERSPACE HEADQUARTERS, LLC

2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: 6785 ARROYO DR UIERA FL 32940	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	6785 ARROYO DR VIERA FL 32940	
01/04/2008 3. Date of filing/registration in Florida	L08000001236 S 72 4. Document number P	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
Registered Agent:	CORPORATION SERVICE COMPANY	
Registered Office Address:	1201 HAYS STREET TALLAHASSEE, FL 32301	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:	
NEW Registered Agent:	PARACORP INCORPORATED	
NEW Registered Office Address:	236 EAST 6th AVENUE	
(MUST BE FLORIDA STREET ADDRESS)	TALLAHASSEE FI 32303	

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 hability 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)

PAOLA KOUNICK

(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 duties, 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.

Barbara Geiger, Secretary Paracrorp Incorporated

(Signature of Registered Agent)

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