L08000054270

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SECRETARY OF STATE

B. BOSTICK
MAY 1 0 2011
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Performance Druct La Name of Limited	Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Jenniteu Vond Name of Person	
Performance Direct, LCC Firm/Company	
774 NW 455t Address	SEURETA! TALLAHAS:
Payano Boach, FL 33064 City/State and Zip Code	
E-mail address: (to be used for future annual report notification	glad 0070gmail com BIT 5
For further information concerning this matter, plea	
Name of Person at (5)	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 amount	unt:
\$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:	ance Direct LLC
2. (a) Principal office address of limited liability company:	
(Note: MUST BE STREET ADDRESS)	Pompano Beach FZ ?3064
	<u> </u>
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	
21. 1	1 - 9
3 Date of filing/registration in Florida 4	L0800054270
3. Date of filing/registration in Florida 4	. Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
Registered Agent:	Jennen Dock Dixon
Registered Office Address:	2625 NW 77Arc
	Sunix F2 33313
(b) Enter name of NEW Registered Agent and/or NEW	Registered Office address:
NEW Registered Agent:	tinhen Dad
NEW Desistand Office Address.	774 11/24566+
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	774 NM 45 Street
	Paypano Back, FL 33064
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identically company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company.	rida street address of the registered office al. Or, in the case of a Florida limited was/were authorized by an affirmative vote.
Signature of a member or authorized representative of a member	Single Control of the
Signature of a member of authorized representative of a member	
Jonnster Dash	
Printed or typed name of signee	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the proj and I am familiar with and accept the obligations of my posi Chapter 608, F.S. Or, if this document is being filed to mere address, I hereby confirm that the limited liability company	ree to act in this capacity I further agree to per and complete performance of my duties, tion as registered agent as provided for in ly reflect a change in the registered office has been notified in writing of this change.
Signature of Registered Agent	