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S. HAWKES

DEC -1 2009

EXAMINER

## **COVER LETTER**

Division of Corporations		
SUBJECT:	WOLO LLC	
	of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registere	ed Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerni	ing this matter to the following:	
COURTNEY K. BALL		
Name of Person		
WOLO LLC	1	
Firm/Company		
4351 LEGENDARY DF	₹.	
Address	handele sentation and the sent all the sent	
DESTIN, FLA. 32541		
City/State and Zip Code		
JIM@DESTINSTARS.CO E-mail address: (to be used for future annual repo	OM ort notification)	
For further information concerning this m	natter, please call:	
JIM BALL	at ( 850 ) 424-6686	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the follow	wing 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.

Name of the limited liability company:	WOLO LLC		
·2. (a) Principal office address of limited liability company	y: 4351 LEGENDARY DR		
_[✓] (Note: MUST BE STREET ADDRESS)	DESTIN, FLORIDA, 32541		
(b) Mailing address of limited liability company:	WOLO LLC		
(Note: MAY BE POST OFFICE BOX)	4351 LEGENDARY DR		
11/23/2009	DESTIN, FLORIDA, 32541		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on			
Registered Agent:	UNITED STATES CORPORATION AGE		
Registered Office Address:	13302 WINDING OAKS BLVD SUITE A-100		
	TAMPA, FLORIDA, 33612		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:		
<u><b>NEW</b></u> Registered Agent:	JAMES K. BALL		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1131 BAYCOURT		
MUST DE LEMIDA STREET ADDRESS	DESTIN ,FL 32541		
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 liability 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			
COURTNEY K. BALL Printed or typed name of signee	<del></del>		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the providing and I am familiar with and accept the obligations of my portugation of the company of the	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.		

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