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C. LEWIS

AUG - 4 2009

EXAMINER

COVER LETTER

Registration Section

** Division of Corporations	
SUBJECT: B	sing Design LLC
Name of Li	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Of	Tice Change and fee(s) are submitted for filing.
Please return all correspondence concerning the	his matter to the following:
Jason M Pugh	•
Name of Person	
Firm/Company	
4244 Grand Meadows Blvd.	
Address	
Melbourne, FL 32934 City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
bingdesign@gmail.com E-mail address: (to be used for future annual report not	ification)
For further information concerning this matter	
	at (321) 473-6591
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	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:	Bing Design LLC		
2. (a) Principal office address of limited liability company	4244 Grand Meadows Blvd.		
- √ — (<u>Note: MUST BE STREET ADDRESS</u>)	Melbourne, Fl. 32934		
(b) Mailing address of limited liability company:	4244 Grand Meadows Blvd.		
- √ — (<u>Note: MAY BE POST OFFICE BOX</u>)	Melbourne; FL 32934		
09/22/2008	L08000089714		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of Signs:		
Registered Agent:	Jason M Pugh		
Registered Office Address:	716 SW 16TH AVE APT 311 GAINESVILLE FL 32601 US APT 3260		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	[no change]		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	4244 Grand Meadows Blvd. Melbourne ,FL32934		
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 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.			
Signature of Registered Agent			

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25,00