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C. LEWIS

MAR 2 3 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Wink L, LLC (Name of Limited Liability Company))	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are su	abmitted for filing.	
Please return all correspondence concerning this matter to the following:		
Lindsey Tackett (Name of Person)		
Wink L, LLC (Firm/Company)		
8833 Perimeter Park Blvd, Suite 102 (Address)		
Jacksonville, FL 32216		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Lindsey Tackett at (_904) 228-6748		
(Name of Person) (Area Code & Daytime	Telephone Number)	
Registration Section Division of Corporations Clifton Building Registration Section Division of Corporations P.O. Box 6327	Registration Section Division of Corporations P.O. Box 6327	
Enclosed is a check for the following amount:		
\$25 Filing Fee \$6	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: Wink L, LLC	<u> </u>
2. (a) Principal office address of limited liability compan (<i>Note: MUST BE STREET ADDRESS</i>)	y: 8833 Perimeter Park Blvd, Suite 102 Jacksonville, FL 32216
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	8833 Perimeter Park Blvd. Suite 102 Jacksonville, FL 32216
1/8/09 3. Date of filing/registration in Florida	L 0900002184 4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	AFFinity Law Firm, P.L.
Registered Office Address:	3947 Boulevard Center Dr., Suite 101 Jacksonville, FL 32207
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	W Registered Office address: Gust G. Sarris 3947 Blvd. Center Dr. Suite 101 Jacksonville, FL 32207
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	laws of the State of Florida, it is hereby confirmed et address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited
Lindsey Tackett (Printed or typed name of signee) I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pram 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 liability company has been notifie	agree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby d in writing of this change.
(Signature of Registered Agent)	AHE HAR
Division of Corporations, P.O. Box	k 6327, Tallahassee, FL 32314

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