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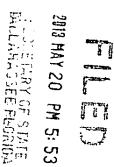
(Requestor's Name)				
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
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MAY 21 2013 D. BRUCE

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: SEASIDE INTERNET-PUTNAM, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rebecca Stevens

Name of Person

Seaside Internet, LLC

Firm/Company

231 Koolabrew Drive NW

Address

Calabash, NC 28467

City/State and Zip Code

seaside_beck@atmc.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rebecca Stevens

...910

579-7900

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: Seeside Internet-Putnam, LLC				
2.	(a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	/: 231 Koolabrow Drive NW Catabash, NC 28467		
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	231 Koolabrew Drive NW Calabash, NC 28467		
04/3	0/13		L09000004808		
3.	Dat	e of filing/registration in Florida	4. Document number		
5.	(a)	(a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
		Registered Agent:	Nudi, Janitoe		
		Registered Office Address:	17888 67th Court North Loxalistches, FL 33470		
ı	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	W Registered Office address:		
		NEW Registered Agent:	Incorp Services, Inc		
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	17888 67th Court North Loxaltatione ,FL 39470 Co.		
con and liab the	firm the ility me	mited liability company is not organized under the land that after the change or changes are made, the Fl. business office of the registered agent will be idently company, it is hereby confirmed that the change(s) mbers of the limited liability company or as otherwise rating agreement of the limited liability company.	orida street address of the registered office ocal. Or, in the case of a Florida limited. Owas/were authorized by an affirmative vote of		
Sign	ature	of a member or authorized representative of a member	50 X		
		idmore ·	_		
I he copy and a second	ereb I al I al Iptel ress	Division of Corporations, P.O. Box 633	7, Tallahassee, FL 32314		
	FILING FEE: \$25.00				

INHS18 (05/08)