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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
	Countryside Press LLC of Limited Liability Company
Nume	of Entitled Elability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registere	ed Office Change and fee(s) are submitted for filing.
Please return all correspondence concern	ing this matter to the following:
Neil S. Stein	
Name of Person	
Countryside Press LL	<u>C </u>
Firm/Company	109 OCT 8 S是称产于JAAN ANAY Init V
2170 Sunnydale Blvd., U	<u>Init V </u>
Address	AH II: 02
	The second se
Clearwater, Fl 33765	5
City/State and Zip Code	
sales@countrysidepress. E-mail address: (to be used for future annual rep	.com
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this m	natter, please call:
Neil S. Stein	at (<u>727</u>) <u>796-0064</u>
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 32314
Tallahassee, Florida 32301	
Enclosed is a check for the follo	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 608.50 liability company submits the following statement in order agent, or both, in the State of Florida.	08, Florida Statutes, the undersigned limited r to change its registered office or registered		
1. Name of the limited liability company:	Countryside Press LLC		
2. (a) Principal office address of limited liability company	2170 Sunnydale Blvd., Unit V		
(Note: MUST BE STREET ADDRESS)			
	Clearwater, Fl 33765		
(b) Mailing address of limited liability company:	Countryside Press LLC		
(Note: MAY BE POST OFFICE BOX)	2170 Sunnydale Blvd., Unit V Clearwater, Fl 33765		
02/12/2009	L09000014618		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
Registered Agent:	Neil S. Stein		
Registered Office Address:	477 Commerce Blvd. Soldsmar, FL 34677		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> : NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	V Registered Office address: Neil S. Stein 2170 Sunnydale Blvd., Unit V Clearwater, Fl 33765 Position Control Con		
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 Neil S. Stein			
Printed or typed name of signee	-		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.		