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EXAMINER



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10/21/09--01020--007 **25.00

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: 8th Douain Technology UC. 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:		
Michael W. Tishman Name of Person		
8 th Donain Technology, UC.		
Firm/Company 211 Nw 107 Drive Address Coral Springs Fl. 33071 City/State and Zip Code Mishman a St. Domnintechnology. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Mishael Tishman Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: MAILING ADDRESS:		
Registration Section Registration Section		
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32314		
Tallahassee, Florida 32301		
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: \text{\$\frac{1}{\text{\$\text{\$}}} \text{\$\text{\$\text{\$\text{\$\text{\$}}}} \text{\$\text{\$\text{\$\text{\$\text{\$}}}} \text{\$\text{\$\text{\$\text{\$\text{\$\text{\$}}}} \text{\$\text{\$\text{\$\text{\$\text{\$\text{\$}}}} \$\text{\$\exititt{\$\text{\$\text{\$\texitt{\$\text{\$\text{\$\text{\$\text{\$\tex{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$	nain technology, LLC.	
2. (a) Principal office address of limited liability company:		
(Note: MUST BE STREET ADDRESS)	2111 NW/07 Drive Coral springs FL 33071	
(b) Mailing address of limited liability company:		
(Note: MAY BE POST OFFICE BOX)	2111 NW107 Drive Coral Springs Fl. 33071	
2/18/2009 3. Date of filing/registration in Florida	L 090000 16483	
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:	Corporation Service Company	
Registered Office Address:	Tallahassee, Fl. 32305 02	
	Talla hassee, TI. 3250 05	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
<u>NEW</u> Registered Agent:	Michael Tishmany So	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2111 NW 107 Drive 500 Coral Springs Fl. 33071	
	,FL	
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		
Michael W. Tishman		
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 pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to sper 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.	

Signature of Registered Agent