## L09000019446

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Special Instructions to Filing Officer:			
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FILED 2009 AUG 27 AM 10: 34 SECRETARSEE, FLORIDA

Office Use Only

L09-1986

M. THOMAS

AUG 28 2009

**EXAMINER** 

## COVER LETTER

Division of Corporations			
SUBJECT: Another Gre Name of	eat IDea Limited Liability Co	MArketi	Ng_
Dear Sir or Madam:			
The enclosed Registered Agent/Registered	Office Change and for	ee(s) are submitted	for filing.
Please return all correspondence concerning	g this matter to the fo	ollowing:	
WAYNE M (			2009 AUG 27 AM 10: 34 SECRETARY OF STATE TALLAHASSEE, FLORID
Another Great ID	sea MArke-	ting	AM 10: 34 SEE, FLORIE
5111 66th St North	Suite Z	.12	7
Saint Peters burg, City/State and Zip Code	FL 3370	99	
Greg JACKww & yak E-man address: (to be used for future annual report	notification)		
For further information concerning this mat	tter, please call:		
WAYNE CAIN Name of Person	at ( <u>727</u> <u>)</u>	329 680 ) ode & Daytime Telephone	Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registration of P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, Florida 32314	
Enclosed is a check for the following	ing amount:		
17 \$25 Filing Fee	S55 Fili	ng Fee & Certified (	Conv

## . 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: Another	Great IDEA MArketing LLC
2. (a) Principal office address of limited liability company	F111 4 66 1 1 4 4 5 5
(Note: MUST BE STREET ADDRESS)	St Petasburg FL 33709
(b) Mailing address of limited liability company:	5111 66 54 North Suite 212
(Note: MAY BE POST OFFICE BOX)	St. Peterslowg FL 33709
02/25/2009	L090000-1946
3. Date of filing/registration in Florida	4. Document number $19649$
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Pept. of state:
Registered Agent:	Gregory A. JACKEWINI
Registered Office Address:	5111 66 St North Stite 212 St Pete FL 193709 111
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address 2
NEW Registered Agent:	WAYNE Cain
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5111 66St N Suite Z12 SAINT Peters Burg FL 33709
If the limited liability company is not organized under the I confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote
Gregory A JACKWIN  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 product and I am familiar with and accept the obligations of my poschapter 608, F.S. Or, if this document is being filed to met 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.
Walfre aux Signature of Registered Agent	