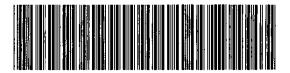
L09000021024

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



200148519662

04/03/09--01034--003 **25.00

FILED

2009 APR -3 PM 2: 07

SECRETARY OF STATE

C. LEWIS

APR - 6 2009

EXAMINER

COVER LETTER

Ŧ

Registration Section Division of Corporations		
ECT: BID FRENZEE, LLC (Name o	f Limited Liability Company)	
ir or Madam:		
closed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing,	
-	-	
. Ferrell		
(Name of Person)		
nzee, LLC		
(Firm/Company)	· · · · ·	
Nob Hill Rd., STE #169		
(Address)		
ion, FL 33324		
(City/State and Zip Code)		
ther information concerning this matte	er, please call:	
•		
s Ferrell	at (954) 224-0646	
(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 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following	g amount:	
	Division of Corporations ECT: BID FRENZEE, LLC (Name of ir or Madam: closed Registered Agent/Registered Oreturn all correspondence concerning Ferrell (Name of Person) Nob Hill Rd., STE #169 (Address) ion, FL 33324 (City/State and Zip Code) ther information concerning this matters Ferrell (Name of Person) STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	

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: BID FRE	NZEE, LLC	ı
2. (a) Principal office address of limited liability com (Note: MUST BE STREET ADDRESS)	pany: 151 N. Nob Hill Rd., STE #169 Plantation FL 33324 US	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	151 N. Nob Hill Rd., STE #169 Plantation FL 33324 US	i 1
03/03/2009	L09000021024	
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:	CHARLES FERRELL	
Registered Office Address:	2105 CHAMPIONS WAY NORTH LAUDERDALE FL 33068 US	0
(b) Enter name of <u>NEW Registered Agent</u> and/or	NEW Registered Office address:	
<u>NEW</u> Registered Agent:	InCorp Services, Inc.	E
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	17888 67th Court North	
	Loxahatchee,FL_33470	
limited liability company.	street address of the registered office and the business	
(Signature of a member or authorized representative of a member)		
Cherles Ferrell		
(Printed or typed name of signee)		
I hereby accept the appointment as registered agent as comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my positive. So, if this document is being filed to merely reflect confirm that the limited liability company has been not supposed on behalf of In Corp Service (Significant Appen)	nd agree to act in this capacity. I further agree to e proper and complete performance of my duties, and I tion as registered agent as provided for in Chapter 608, ct a change in the registered office address, I hereby iffied in writing of this change. Les, Tho.	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (05/08)

4

MAPR -3 PM 2: 07