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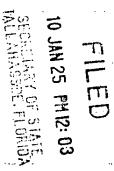
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Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

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S. HAWKES

JAN 2 6 2010

EXAMINER

COVER LETTER

TO:	O: Registration Section Division of Corporations		
SUBJ	ECT:	KRASIM LLC	
	Name of	Limited Liability Company	
Dear	Sir or Madam:		
The e	nclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Please	e return all correspondence concerning	this matter to the following:	
	AIDA DALI		
	Name of Person		
	KRASIM LLC		
	Firm/Company	<i>,</i>	
	54 LEIDEL DRIVE		
	Actions		
	PALM COAST, FL 3213	7	
	City/State and Zip Code		
	LNUR@CFL.RR.COM -mail address: (to be used for future annual report	notification)	
For fu	arther information concerning this mat	ter, please call:	
	AIDA DALI	_at (386)237-4940	
	Name of Person	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	ing 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:	KRASIM LLC		
2. (a) Principal office address of limited liability company	: 5 Heron Drive o		
(Note: MUST BE STREET ADDRESS)	Palm Coast, FL 32137		
(b) Mailing address of limited liability company:	5 Heron Drive		
(Note: MAY BE POST OFFICE BOX)	Palm Coast, FL 32137		
4/14/2009	L09000035926		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:		
Registered Agent:	Aida Dali		
Registered Office Address:	5 Heron Drive Palm Coast, FL 32137		
NEW Registered Agent: NEW Registered Office Address:	54 Leidel Drive		
(MUST BE FLORIDA STREET ADDRESS)			
	Palm Coast ,FL 32137		
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	_		
Aida Dali			
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 proand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to meaddress. Thereby 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 was been notified in writing of this change		

Signature of Registered Agent