## LD9000049094

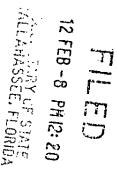
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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D. BRUCE

FEB 0 9 2012

**EXAMINER** 

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJ		Frozen Moments, LLC  f 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 concernin	ng this matter to the following:
	Katie Thurman  Name of Person	
	eResidentAgent, Inc.	
	Firm/Company	
	12121 Wilshire Boulevard, Suit Address	2 F1
	Los Angeles, CA 90025 City/State and Zip Code	
E	eteam@eminutes.com -mail address: (to be used for future annual report	No.
For fu	erther information concerning this ma	atter, please call:
<del></del> ,	Katie Thurman Name of Person	at ( <u>310</u> ) <u>820-1000 ext. 701</u> Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
	Enclosed is a check for the follow	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.

	Freezan Mamonto III C
1. Name of the limited liability company:	Frozen Moments, LLC
2. (a) Principal office address of limited liability company	: 50 Biscayne Blvd., Apt 1801
(Note: MUST BE STREET ADDRESS)	Miami, FL 33131
(b) Mailing address of limited liability company:	10960 Wilshire Boulevard, 5th Flr
(Note: MAY BE POST OFFICE BOX)	Los Angeles, CA 90024
05-07-2009	L09000049094
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	National Corporate Research, LTD., Inc.
Registered Office Address:	155 Office Plaza Drive
(b) Enter name of <b>NEW Registered Agent</b> and/or <b>NEW</b>	V Registered Office address:
<b><u>NEW</u></b> Registered Agent:	eResidentAgent, Inc.
NEW Registered Office Address:	236 E. 6th Avenue
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL32303
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability 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 Hability company.  Signature of a member or authorized representative of a member	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization
Katie Thurman	
Printed or typed name of signee	-
I hereby accept the appointment as registered agent and accomply with the provisions of all statutes relative to the product and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or if this document is being filed to mer address, I hereby confirm that the United 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 invely reflect a change in the registered office has been notified in writing of this change.

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

Signature of Registered Agent