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PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
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Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
G. MCL	EAD-	
W. MICE	Office Use Onl	v.

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EXAMINER



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DIVISION OF CORPORATION

COVER LETTER

Division of Corporations	
SUBJECT: Before	e I Forget Photography, LLC
	of Limited Liability Company
, T territo	or Emiliary Education Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	ed Office Change and fee(s) are submitted for filing.
Di	in a this master to the fallering.
Please return all correspondence concern	ing this matter to the following:
Kimberly Dudley	
Name of Person	
Deferred Format Photograph	U.O
Before Forget Photograph Firm/Company	IY, LLC
1 min Company	
2891 Everholly Lane)
Address	
Jacksonvilla El 222	22
Jacksonville, FL 3222 City/State and Zip Code	30
City/Diate and Zap Code	
	L
kimberly.h.dudley@gmai E-mail address: (to be used for future annual rep	I.COM port notification)
2 222033 (40 00 200 101 101 101 101 101 101	
For further information concerning this i	natter, please call:
Kimberly Dudley	at (904) 370-1329
Name of Person	at (904) 370-1329 Area Code & Daytime Telephone Number
,	The code of paytine Temphone Panton
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 32314
Tallahassee, Florida 32301	
Enclosed is a check for the follo	owing amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy
▼ \$£5 1 ming 1 cc	[] ass rang ree at certified copy

TO: Registration Section

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:	Before I Forget Photography, LLC					
2. (a) Principal office address of limited liability company		2891 Everholi	ly Lane	······		
(Note: MUST BE STREET ADDRESS)		sonville FL 32223				
(b) Mailing address of limited liability company:		, , , , , , , , , , , , , , , , , , , 	_			
(Note: MAY BE POST OFFICE BOX)		Everholly Lane sonville FL 32223				
June 8, 2009		L09000055571				
3. Date of filing/registration in Florida	4. Do	cument number				
5. (a) Registered Agent and Registered Office show	wn on the rec	ords of the Florida Dept.	of State:			
Registered Agent:		Corporation Company	 			
Registered Office Address:		Centerville Road		9.		
	<u>Wilm</u>	ington, DE 19808	<u> </u>	- S. C.		
		···· ··· ··· ··· ··· ··· ··· ··· ··· ·	3	- ₹		
(b) Enter name of NEW Registered Agent and/o	or <u>NEW Reg</u>	istered Office address:	di	유 R		
NEW Registered Agent:	Kimb	erly Dudley	₽¥	25		
NEW Registered Office Address:	<u>2891</u>	Everholly Lane	<u> </u>	0.8A		
(MUST BE FLORIDA STREET ADDRESS)		sonville,	جم FL <u>3222</u>	3		
If the limited liability company is not organized unde confirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the char of the members of the limited liability company or as or the operating agreement of the limited liability considerable. Signature of a member or authorized representative of a member Kimberly Dudley Printed or typed name of signae	, the Florida : e identical. Cange(s) was/v	street address of the regis Or, in the case of a Florida vere authorized by an affi	stered off a limited irmative	vote		
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability consistence of registered agent Division of Corporations, P.O. I	<u>.</u>		ırther ag of my di ovided fo stered of this cha	ree to uties, or in ffice nge.		
FILING FEE: \$25.00						