Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GUNSTER, YOAKLEY, ETAL. (WEST PALM BEACH)

Account Number: 076117000420 Phone : (561)650-0728 Fax Number : (561)655-5677

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please

Email Address:

REGISTERED AGENT CHANGE AEGEAN DISC, LLC

Certificate of Status	1
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Page Count	03
Estimated Charge	\$43.75

\$30.0C

Help

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EXAMINER

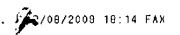
Electronic Filing Menu



H09000254633 3

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ		Aegean Disc, LLC
	Name of L	Limited Liability Company
Dear :	Sir or Madam:	
The e	nclosed Registered Agent/Registered ()	Office Change and fee(s) are submitted for filing.
Please	return all correspondence concerning	this matter to the following:
	Lisa A. Schneider, Esq.	
-	Name of Person	
	Allugren Volumen a seeme	
- <u></u>	GUNSTER, YOAKLEY & STEWAR Firm/Company	<u>(Т. Р.А</u>
	1 Into Company	
	777 South Flagler Drive, Suite 50	0 Fast
	Address	
	West Palm Beach, FL 3340	1
	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	mcramer-scharlatt@gunster.co	om
Ŀ-	mail address; (to be used for future annual report no	otification)
or fu	ther information concerning this matte	r, please call:
		•
Mar	y E. Cramer-Scharlatt, C.P., FRP	at (561) 650-0728
	Name of Person	Area Code & Daytime Telephone Number
	CTOFFT/CAUDIED ADDRESS	MATERIAL ADRADA
	STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: 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:
ı	✓ \$25 Filing Fee	\$55 Filing Fee & Certified Copy



H09000254633 3

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:	Aegean Disc, LLC	
2. (a) Principal office address of limited liability company	y: 11621 Kew Gardens Avenue	
(Note: MUST BE STREET ADDRESS)	Suite 109 Palm Beach Gardens, FL 33410	
(b) Mailing address of limited liability company:	11621 Kew Gardens Avenue	
(Note: MAY BE POST OFFICE BOX)	Suite 109 Palm Beach Gardens, FL 33410	
July 22, 2009	L09000070384	
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:	GY Corporate Services. Inc.	
Registered Office Address:	777 South Flagler Drive Suite 500 East West Palm Beach, FL 33401	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	W Registered Office address:	
NEW Registered Agent:	Kathryn K. Theofilos	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	11621 Kew Gardens Avenue Suite 109 Palm Beach Gardens "FL33410	
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 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 Lisa A. Schneider, Esq., Authorized Representative		
Printed or typed name of signee	- STA	
I hereby accept the appointment as registered agent and a comply with the provisions of all statules relative to the proving and I am familiar with and accept the obligations of my posting for the confirmation of the province of the confirmation of the company address. I hereby confirm that the limited liability company	gree to act in this capacity. I further there complete performance of my duties sition as registered agent as provided for invertely reflect a change in the registered office has been notified in writing of this change.	
Signature of Regulared Agent Kathryn K. Theofilos		
V Division of Corporations, P.O. Box 63: FILING FEE: \$2	· ·	

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