

L09000092029

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

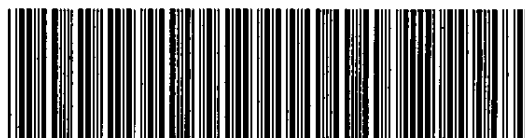
Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

OCT 15 2009

EXAMINER



600161419666

10/14/09--01009--003 \*\*25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
09 OCT 14 PM 12:54

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Destination Publications L.L.C.  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BONNIE M. WALTERS  
Name of Person

Destination Publications  
Firm/Company

106 Oak Street  
Address

Safety Harbor, FL 34695  
City/State and Zip Code

ACCOUNTING@  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chris Holland at (727) 437-8474  
Name of Person 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 following amount:**

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: Destination Publications
2. (a) Principal office address of limited liability company: 931 Woodbridge CT  
Safety Harbor, FL  
34695  
(Note: **MUST BE STREET ADDRESS**)
- (b) Mailing address of limited liability company: P.O. Box 1063  
Safety Harbor, FL  
34695  
(Note: **MAY BE POST OFFICE BOX**)
3. Date of filing/registration in Florida: 9/21/2009
4. Document number: L09000092029

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

BONNIE M Walters

Registered Office Address:

106 Oak Street  
Safety Harbor, FL  
34695

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

931 Woodbridge CT  
SAFETY HARBOR  
FL 34695

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

BONNIE M Walters  
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.