L0900011335H

(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:			



900187748459

11/19/10--01018--008 **25.00

Office Use Only

L. SELLERS

NOV 2 2 2010

EXAMINER

10 KOV 19 PH 4: 01
SECREPARY OF STATE

COVER LETTER

TO:	Registration Section Division of Corporations	·
SUBJ	DCI.	AB Universal LLC Limited Liability Company
		James Blue May Company
Dear S	Sir or Madam:	
The en	nclosed Registered Agent/Registered (Office Change and fee(s) are submitted for filing.
Please	e return all correspondence concerning	this matter to the following:
	-	
	Rebeca Gulloso	
	Name of Person	
	Rebeca Gulloso	
	Firm/Company	
	3409 Great Pond Drive	
	Address	
	Kissimmee, FL. 34746	
	City/State and Zip Code	
	veszeniag@hotmail.com	•
E	yeszeniag@hotmail.com -mail address: (to be used for future annual report r	otification)
For fi	urther information concerning this matt	er, please call:
	Rebeca Gulloso	at (321)251-4713
	Name of Person	Area Code & Daytime Telephone Number
	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 following	ng 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:	AB Universal LLC		
2. (a) Principal office address of limited liability con	mpany: AB Universal LLC.		
(Note: MUST BE STREET ADDRESS)	3409 Great Pond Drive Kissimmee, FL. 34746		
(b) Mailing address of limited liability company:	AB Universal LLC.		
(Note: MAY BE POST OFFICE BOX)	3409 Great Pond Drive Kissimmee, FL. 34746		
November 25, 2009	L09000113354		
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 S			
Registered Agent:	My Corporation USA.com		
Registered Office Address:	1075 NE 99th Street Miami Shores, FL. 33138		
(b) Enter name of <u>NEW Registered Agent</u> and/o <u>NEW Registered Agent</u> :	r NEW Registered Office address: Rebeca Gulloso		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Rebeca Gulloso 3409 Great Pond Drive		
MOST DE LEGICATION DE L'ADDICION	Kissimmee ,FL 34746		
If the limited liability company is not organized under 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 confirmed that the characteristic of the limited liability confirme	the Florida street address of the registered office e identical. Or, in the case of a Florida limited nge(s) was/were authorized by an affirmative vote		
Signature of a member or authorized representative of a member	ARE OV		
Yeszenia Gulloso Printed or typed name of signee			
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to the 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 confirmation of Registered Agent	and agree to act in this capacity. I further agree to		

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