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(Requestor's Name)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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L. SELLERS

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EXAMINER

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COVER LETTER

TO: Registration Section Division of Corporations		
Sixulon of corporations		
	r Entertainment LLC	
Name of Lim	ited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
,		
Kyle Pintarelli Name of Person		
Name of February		
Rockstar Entertainment LLC		
Firm/Company		
171 Edenburry Ave.		
Address		
Jupiter, FL 33458		
City/State and Zip Code		
Kyle@rockstarcateringcompany.co E-mail address: (to be used for future annual report notific	om	
For further information concerning this matter, J	blease call:	
Kulo Bintaralli	404.0400	
Kyle Pintarelli at	(561) 401-9409 Area Code & Daytime Telephone Number.	
	· · · · · · · · · · · · · · · · · · ·	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301	rananassee, rionua 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	
<u> </u>		

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:	Rockstar Entertainment LLC	
2. (a) Principal office address of limited liability compa	any: 275 Murcia Dr. 210	
(Note: MUST BE STREET ADDRESS)	Jupiter, FL 33458	
(b) Mailing address of limited liability company:	275 Murcia Dr. 210	
(Note: MAY BE POST OFFICE BOX)	Jupiter, FL 33458	
01/04/10	L1000001673	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State	e:
Registered Agent:	Kyle Pintarelli	
Registered Office Address:	275 Murcia Dr. 210 Jupiter, FL 33458	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address:	NEW Registered Office address: 171 Edenburry Ave.	
(MUST BE FLORIDA STREET ADDRESS)	Jupiter ,FL334	58
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company or as other than the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Kyle Pintarelli Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to haddress, I hereby confirm that the limited liability compositions of the limited liability liability compositions of the limited liability liability compositions of the limited liability liability liability compositions of the limited liability li	e Florida street address of the registered of entical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative herwise provided in the articles of organizably.	ffice d vote ation
Signature of Registered Agent		

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