## L10000012579

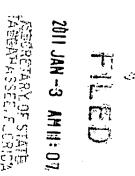
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

. Office Use Only



100189057021

01/03/11--01018--014 \*\*55.00



C. LEWIS

JAN 4 2011

EXAMINER

## **COVER LETTER**

TO:	Division of Corporations		
SUBJ	Revel Ink LLC		
	Name of	f Limited Liability Company	
Dear	Sir or Madam:		
The e	nclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Please	e return all correspondence concernin	g this matter to the following:	
	Kurt Lynn		
	Name of Person		
	Revel Ink LLC		
	Firm/Company		
	8051 N. Tamiami Trail, Uni	t 19	
	Address		
	Sarasota, Florida 3424	3	
	City/State and Zip Code		
E	admin@revel-ink.com -mail address: (to be used for future annual repor	t notification)	
For fu	orther information concerning this ma	tter, please call:	
	Michael Coulas	at (866)574-9998	
	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 follow	ing 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.

Name of the limited liability company:	Revel Ink LLC			
2. (a) Principal office address of limited liability company	: 8051 N. Tamiami Trail			
(Note: MUST BE STREET ADDRESS)	Sarasota, Florida 34243			
(b) Mailing address of limited liability company:				
(Note: MAY BE POST OFFICE BOX)				
February 2, 2010	L10000012579 =			
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				
Registered Agent:	Agents and Corporations, Inc.			
Registered Office Address:	P.O. Box 511 Wilmington, DE 19899-0511			
NEW Registered Agent:  NEW Registered Office Address:	Michael Coulas  11766 Tempest Harbor Loop			
(MUST BE FLORIDA STREET ADDRESS)	Venice ,FL34292			
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.  Kurt D. Lynn  2010.12.23.15:00:29  Signature of a member or authorized 12500 a member				
Kurt D. Lynn	-			
Printed or typed name of signee  I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address, I hereby amfirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.			

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