#1/000032764

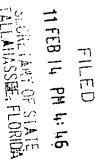
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
·		

Office Use Only



000194066020

02/14/11--01017--005 **25.00



K. BALY EXAMINER FEB 1 5 2011

COVER LETTER

TO: Registration Section Division of Corporation	s		
SUBJECT:	Gregory Aurigemma LLC		
	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:			
Gregory Au	rigemma		
Name of Pe			
Gregory Aurig			
Firm/Comp	iny		
80 NE 4	9th St		
Oakland Park City/State and 2			
gregaurigemr E-mail address: (to be used for futu	na@att.net re annual report notification)		
For further information concerning this matter, please call:			
Greg Aurigemma	at (754) 204-0666		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER AD Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, Florida 3230	Registration Section Division of Corporations P.O. Box 6327 role Tallahassee, Florida 32314		
Enclosed is a check for the following 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:	Gregory Aurigemma LLC		
2. (a) Principal office address of limited liability compa	ny: 2430 NE 7th Ave		
(Note: MUST BE STREET ADDRESS) Wilton Manors, FL 33305			
(b) Mailing address of limited liability company:	2430 NE 7th Ave		
(Note: MAY BE POST OFFICE BOX)	Wilton Manors, FL 33305		
03/24/2010	L10000032764		
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:	Nancy Niblock		
Registered Office Address:	2430 NE 7th Ave Wilton Manors, FL 33305		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:			
<u>NEW</u> Registered Agent:	70, 5		
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	80 NE 49th St.		
	Oakland Park ,FL33334		
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 of authorized representative of a member			
Gregory Aurigemma Printed or typed name of signee			
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.			

Signature of Registered Agent