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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
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PICK-UP WAIT MA	ML		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			

Special Instructions to Filing Officer:

A. LUNT

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EXAMINER

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COVER LETTER

TO:	Registration Section Division of Corporations	
SUB	· · · · · · · · · · · · · · · · · · ·	TINE RENTALS, LLC. Limited Liability Company
Dear	Sir or Madam:	
The e	enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.
Pleas	e return all correspondence concerning	this matter to the following:
~~~·	MELECIA JOHNSON  Name of Person	2010 DEC 17 PM 12: 17 SEGRETARY OF STATE FALLATIASSEE, FLORIDS
	PRISTINE RENTALS, LLC Firm/Company	7 PM P2: 17
	7027 W. BROWARD BLVD # :	381
	PLANTATION, FL 33317 City/State and Zip Code	
	DMELPROPERTY@GMAIL.C	OM otification)
For fi	urther information concerning this matte	er, please call:
	MELECIA JOHNSON  Name of Person	at ( 954 ) 980-0006  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	g 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:F	PRISTINE RENTALS, LLC			
2. (a) Principal office address of limited liability company	7027 W. BROWARD BLVD # 381			
(Note: MUST BE STREET ADDRESS)	PLANTATION, FL 33317			
(b) Mailing address of limited liability company:	7027 W. BROWARD BLVD # 381			
(Note: MAY BE POST OFFICE BOX)	PLANTATION, FL 33317			
	7.5 23			
12/13/2010	L10000053151 景 可			
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:	MELECIA JOHNSON SE STORY			
Registered Office Address:	7027 W. BROWARD BLVD # 322 PLANTATION, FL 33317			
NEW Registered Agent:  NEW Registered Office Address:	MELECIA JOHNSON 7027 W. BROWARD BLVD # 381			
(MUST BE FLORIDA STREET ADDRESS)	1021 W. BROWARD BLVD # 361			
	PLANTATION ,FL33317			
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.  MGRM  Signature of a member or authorized representative of a member				
MELECIA JOHNSON Printed or typed name of signee	_			
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the property and I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office whas been notified in writing of this change.			

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