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## LLC REGISTERED AGENT CHANGE CRIKEY, LLC

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JUN 1 6 2010

EXAMINER

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 60 liability company submits the following statement in o agent, or both, in the State of Florida.	8.508, Florida Statutes, the undersigned limited rder to change its registered office or registered
1. Name of the limited liability company:	CRIKEY, LLC
2. (a) Principal office address of limited liability comp	any:
(Note: MUST BE STREET ADDRESS)	9121 SW 22nd Court, Unit D Fort Lauderdale, Ft. 33324
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	9121 SW 22nd Court, Unit D Fort Lauderdale, FL 33324
06/07/2010	L10000060878
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:	Donald Costello
Registered Office Address:	9121 SE 22nd Court Unit D Fort Lauderdale, FL 33324
(b) Enter name of NEW Registered Agent and/or 1	NEW Registered Office address:
NEW Registered Agent:	Donald Costello
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	9121 SW 22nd Court Unit D Fort Lauderdale ,FL33324
If the limited liability company is not organized under confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member.  Donald Costello  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 and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability company.  Signature of Registered Agent	te Florida street address of the registered office dentical. Or, in the case of a Florida limited (c(s) was/were authorized by an affirmative vote therwise provided in the articles of organization pany.
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314	
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