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(Re	questor's Name)					
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## **COVER LETTER**

TO:	Registration Section Division of Corporations							
SUBJ	JECT:Name of I	Area Limited			LC Company			
Dear	Sir or Madam:			·				
Dear	on or maddin.							
The e	nclosed Registered Agent/Registered (	Office (	Chan	ge an	d fee(s) are	submitted	for filin	ıg.
Please	e return all correspondence concerning	this m	atter	to the	e following	:		
	Marie B Code, Esq		, aa					
	Name of Person							
	Marie B. Code Esq. P.L.						MALL	2042 AUG -6
	Firm/Company						AHA AHA	8
	1308 SW 27th Terrace						KE TARY ( AHASSEE	
	Address							50 年 88
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	Cape Coral FL 33914						<b>9</b> ,00	¥
	City/State and Zip Code							
<u>F</u>	marie@marieesquire.com E-mail address: (to be used for future annual report	l notificatio	on)					
For fi	urther information concerning this mat	ter, plea	ase c	all:				
	Marie B Code, Esq	at (	23	9 )		829-006	33	
	Name of Person			Are	a Code & Day	time Telephon	e Number	
	STREET/COURIER ADDRESS:		N	MAII.	ING ADDR	RESS:		
	Registration Section Registration Section							
	Division of Corporations		Division of Corporations P.O. Box 6327					
	Clifton Building 2661 Executive Center Circle				lox 6327 assee, Florid	lo 22214		
	Tallahassee, Florida 32301		1	ı amam	assee, Floric	ia 32314		
	Enclosed is a check for the followi	ng amo	ount	:				
	<b></b> ✓ \$25 Filing Fee		$\Box$	\$55 ]	Filing Fee &	& Certified	Сору	

## 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:	Areapedia LLC				
2. (a) Principal office address of limited liability company	y: 8961 Conference Dr. Ste 2				
(Note: MUST BE STREET ADDRESS)	Fort Myers, FL 33919				
(b) Mailing address of limited liability company:	8961 Conference Dr. Ste 2				
(Note: MAY BE POST OFFICE BOX)	Fort Myers, FL 33919				
06/11/2010	L10000062493				
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:	Code, Marie B Esq				
Registered Office Address:	1202 SE 8th Place Ste B Cape Coral FL 33990				
NEW Registered Agent:  NEW Registered Office Address:  (MUST BE FLORIDA STREET ADDRESS)	1308 SW 27th Terracen F 33914				
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Signature of a member of authorized representative of a member  Marie B Code, Esq  Printed or typed name of signce	Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization				
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my portugations of the confirmal that the limited liability companies of Registered Agent	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office sy has been notified in writing of this change.				

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