1100000 64102

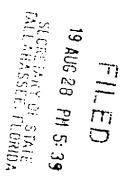
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						





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SEP = 0 2013 T SCHROEDER

COVER LETTER

Divis	sion of Corporations					
SUBJECT:	MarketUS LLC					
	Name of Limited Liability Company					
Dear Sir or N	Madam:					
The enclosed	Registered Agent/Registered Off	ice Change and f	ee(s) are submitted for filing.			
Please return	all correspondence concerning th	is matter to the fo	ollowing:			
Michael Pr	ice					
	* Name of Person		_			
MarketUS	LLC					
	Firm/Company		_			
1714 Claw	Court					
 ''	Address		_			
Venice FL	34293					
** 1	City/State and Zip Code	-	_			
<u> </u>	narketus.com					
E-mail:	address: (to be used for future ann	ual report notific	ation)			
For further in	formation concerning this matter,	please call:				
Michael Pr	ice	954 at (610-1100			
	Name of Person		Area Code & Daytime Telephone Number			
Regis Divis Clifto 2661	EET/COURIER ADDRESS: stration Section ion of Corporations on Building Executive Center Circle hassee, Florida 32301	Regi Divi P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 shassee, Florida 32314			
Encl	osed is a check for the following	amount:				
2 \$2	5 Filing Fee	\$ 55	\$55 Filing Fee & Certified Copy			

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TO: Registration Section

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

 Na (a) 	ame of the limited liability company: MarketUS I		. 1714 CI	aw Court	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(r	' <i>/</i> ———	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Venice FL 34293		Venice F	FL 34293	
	06/14/2010		L1000006	64102	
3.5. (a)	Date of filing/registration in Florida Michael Price	4.		Document number	
J. (a)	Registered Agent and Registered Office shown on the records 1919 SE 10th Ave			::	
	Registered Office Address 1919 SE 10th Ave	<u>TADDRESS</u>	2	_	
	Ft Lauderdale	FL_33316		19 A	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address: 1714 Claw Court		FILED AUG 28 PH 5: ABASSET TLOR		
	NEW Registered Office Address:		H 5: 39		
	Venice	FL_34293			
agent v was/wa	imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member types of organization or the operating agreement of	of the regis Hiability cos s of the lim	stered office ompany, it is lited fiability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
Miller Han-			hael Price	•	
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee	
provisi the obl to mere	by accept the appointment as registered agent and a constant of all statutes relative to the proper and comple igations of my position as registered agent as proviely reflect a change in the registered office address, I in writing of this change.	igree to act gie perform ded for in (I hereby co	in this cape ance of my c Thapter 605 onfirm that t	icity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or. if this document is being filed the limited liability company has been	