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B. BOSTICK

DEC 1 4 2010

EXAMINER

COVER LETTER

10	COVERLETTER	
TO: Registration Section Division of Corporations	•	
	ame of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Reg	istered Office Change and fee(s) are su	abmitted for filing.
Please return all correspondence cor	ncerning this matter to the following:	
Name of Person	taughey	
Chat Chat	SLP LLC	
4101 El 7	Preido Bluch	10 DEC SEURL TALLAH
Tampa [- City/State and Zip Cod	2 333629 Eyahoo.com	O 13 PH 4
Sealverse+mh@ E-mail address: (to be used for future annu	eyahoo. com ual report notification)	PM 4:27 OF STATE E. FLORIDA
For further information concerning to	his matter, please call:	
Truck M. Haug Name of Person	hey at (813) 831-6	2720 Telephone Number
STREET/COURIER ADDRE Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	SS: MAILING ADDRES Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, Florida 32	ons
Enclosed is a check for the t	following amount:	
✓\$25 Filing Fee	\$55 Filing Fee & C	ertified Conv

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

Pursuant to the provisions of sections 608.416 or 608.5 liability company submits the following statement in order tagent, or both, in the State of Florida.	508, Florida Statutes, the undersigned limited er to change its registered office or registered
1. Name of the limited liability company:	t Chat SLP, LLC
2. (a) Principal office address of limited liability company	y:
(Note: MUST BE STREET ADDRESS)	4101 El Prado Block Tanpa FC 33629
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	4101. El Prado Blud Tampa, FC 33629
3. Date of filing/registration in Florida	<u>L1000078684</u> 4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Trudi M. Haughey
Registered Office Address:	HIDI EL Prado Blod. Tampa, Fr. 35629
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	W Registered Office address:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	4101 El Prado Blod Tampa FL 33620
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 ident 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 or authorized representative of a member Printed or typed name of signee	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of officialization
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my polychapter 608, F.S. Or, if this document is being filed to metadaress, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.
Division of Corporations, P.O. Box 632	77 Tollohossos El 22214

FILING FEE: \$25.00

INHS18 (05/08)