## LIDOODIDELA

(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:				
L. SELLERS				
SEP -7 2011 EXAMINER				

Office Use Only



100211702601

09/06/11--01042--019 \*\*25.00



## 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. The many of the United	. 4 11 - 1 - 11 14	. Lets Da	nce Florida, LLC		
1. The name of the limite					
2. The mailing address o	f the limited liabil	ity company is:	1816 Oak Ridge	Road,	
Safety Harbor, FL 346	95			•	
September 30, 2010			L10000102269		
3. Date of filing/registration in Florida		<del>-</del>	4. Document number		
5. The name of the registe		registered offic	e address as shown	on the records of the	
Florida Department of	State: Vcorp Service:	s, LLC			
	7200 W Camir	Name no Real, Suite	102	•	
		Address	·····	•	
	Boca Raton	· - · ·	3433	-	
< m		City, State and	•		
6. The name and address	of the new register	red agent and/or	r office:		
	Edward J. Mey	ers			
	1816 Oak Ridg	Name je Road			
	Florida street ac	ldress (P.O. Box	NOT acceptable)		
	Safety Harbor	<sub>FL</sub> 346	95		
	C	ity, State and Zi	ip		
If the limited liability come confirmed that after the cland the business office of liability company, it is here the members of the limite the operating agreement of	nange or changes a the registered age reby confirmed that d.l.ability compan	are made, the Fl ent will be identi at the change(s) ay or as otherwis	orida street address cal. Or, in the case was/were authorize	of the registered office of a Elorida limited d by an affirmative vote of	
MA	8/30/2011		_		
Signature of a member or authori	ized representative of a	member)		TO THE	
Edward J. Meyers			_		
(Printed or typed name of signee)				<b>2</b> 5	
I hereby accept the appoint comply with the provision and cam familiar with an Chapter 608, F.S. Or, if the address, I hereby confirm	intment as registers of all statutes red accept the oblige his document is be that the limited lies of 2/30/2011	red agent and as lative to the pro ations of my pos eing filed to met ability company	gree to act in this ca per and complete p sition as registered of rely reflect a change has been notified in	pacity I further agree to erformance of my duties, agent as provided for in in the registered office my writing of this change.	
(Signature of Registered Agent)	,				
Divisio	n of Corporation	s, P.O. Box 632	27, Tallahassee, FL	. 32314	

FILING FEE: \$25.00

INHS18(10/99)