## L10000105523

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C. LEWIS

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EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: PlaceMaker Design Studio, LLC	
	Name of Limited Liability Company
Dear Sir or Madam:	·
The enclosed Registered Agent/F	Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence	concerning this matter to the following:
Christopher And	uszkiewicz
Name of Person	on
PlaceMaker Design	n Studio, LLC
Firm/Compan	
3000 Gulf to Bay Bi	vd., Suite 307
Address	
Clearwater, F	L 33759
City/State and Zip	Code
chris@placemakerde E-mail address: (to be used for future	esignstudio.com annual report notification)
For further information concerning	ng this matter, please call:
Christopher Anuszkiev	vicz at ( 727 ) 726-6124
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADD	PRESS: MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circ Tallahassee, Florida 32301	le Tallahassee, Florida 32314
Enclosed is a check for t	he following amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

## 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:	PlaceMaker Design Studio, LLC
2. (a) Principal office address of limited liability co	ompany: PlaceMaker Design Studio, LLC
(Note: MUST BE STREET ADDRESS)	3000 Gulf to Bay Blvd Suite 307 Clearwater, Florida 33759
(b) Mailing address of limited liability company	: PlaceMaker Design Studio, LLC
(Note: MAY BE POST OFFICE BOX)	1007 Mandalay Ave Clearwater, Florida 33767
10/08/2010	L10000105523 3
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	
Registered Agent:	THE LAW OFFICES OF NICK SPRAD
Registered Office Address:	12000 NORTH DALE MABRY HWY SUITE 110 TAMPA FL 33618 US
(b) Enter name of <u>NEW Registered Agent</u> and/one <u>NEW Registered Agent</u> :	or <u>NEW Registered Office address</u> :  Christopher Anuszkiewicz
NEW Registered Office Address:	3000 Gulf to Bay Blvd., Suite 307
(MUST BE FLORIDA STREET ADDRESS	Clearwater ,FL33759
If the limited liability company is not organized unde confirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the charge of the members of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company.	, the Florida street address of the registered office e identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote
Christopher Anuszkiewicz Printed or typed name of signee	<del></del>
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability co	
Signature of Registered Agent	R B T
Division of Corporations, P.O. B FILING F	Box 6327, Tallahassee, FL 32314 \(\frac{1}{2}\) \(\frac{1}{2}\) \(\frac{1}{2}\) \(\frac{1}{2}\)