L10000119800

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D. BRUCE

DEC 20 2010

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations					
SUB.				·	ls, LLC	
	Name of	Limited	l Liabi	lity C	dmpany	
Dear	Sir or Madam:					
The e	enclosed Registered Agent/Registered	Office (Change	e and	fee(s) are submitted for filing.	
Pleas	e return all correspondence concernin	g this m	atter to	the f	dllowing:	
	Suzanne Gedney					
	Name of Person					
	Firm/Company			1		
	100 Olivia Street				10 L	
	Address					111g.,
					SSI 17	Pro 114 and
	Key West, FL 33040				mo =	il in the second
	City/State and Zip Code				AH W: 29 OF STATE OF LORID	F &
i	-mail address: (to be used for future annual report	notificatio	on)	-		
For fi	urther information concerning this ma	tter, plea	ise cal	l :	•	
	Suzanne Gedney	at (845)	222-8612	
	Name of Person	(<u> </u>	ode & Daytime Telephone Number	
	STREET/COURIER ADDRESS:		M.	AILIN	G ADDRESS:	
	Registration Section				on Section	
	Division of Corporations				of Corporations	
	Clifton Building 2661 Executive Center Circle). Box		
	Tallahassee, Florida 32301		1 a	Hanass	ce, Florida 32314	
	Enclosed is a check for the follow	ing amo	unt:			
	\$25 Filing Fee		 √ \$	55 Fil	ing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR SBOTH 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:
_______ Prime Promo Models, LLC 2. (a) Principal office address of limited liability company: 100 Olivia Street (Note: MUST BE STREET ADDRESS) Key West, FL 33040 (b) Mailing address of limited liability company: PO Box 5053 (Note: MAY BE POST OFFICE BOX) Key West, FL 33040 11/18/10 L10000119800 3. Date of filing/registration in Florida Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of States Registered Agent: Suzanne Gednev Registered Office Address: 100 Olivia Street Key West, FL 33040 Ś (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**5 Kafolina Bien **NEW** Registered Agent: **NEW** Registered Office Address: 1382 Atlantic Blvd Apt # 3 (MUST BE FLORIDA STREET ADDRESS) FL33040 Key West If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Suzanne Gedney Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statules relative to the proper and complete performance of my duties, and familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby popular that the limited liability company has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Fallahassee, FL 32314

FILING FEE: \$25.00