## L10000128054

(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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SECRETARY OF STATE

J. BRYAN

AUG 3 0 2011

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations	
·	
SUBJECT:	Minding My Own LLC
Name of I	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered (	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Gerald W, Kitt	
Name of Person	
Minding My Own LLC	
Firm/Company	AUG 29 PH
	₹ 2°
4555 Deerfield Drive	
Address	
	7.57 12
Danasala Flarida 2000	T STATE
Pensacola, Florida 32526 City/State and Zip Code	
City/State and Zip Code	
litte 004@hallaauth aat	
kitty 004@bellsouth.net E-mail address: (to be used for future annual report r	otification)
For further information concerning this matt	er, please call:
Gerald W. Kitt	at (850)941-0339
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following	ng 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:		inding My Own LLC		
2. (a) Principal office address of limited liability company:		y: 4555 Deerfield Dr.		
(Note: MUST BE STREET ADDRESS)		acola, Florida 32526		
(b) Mailing address of limited liability	ty company:	4555 Deerfield Dr.		
(Note: MAY BE POST OFFIC	E BOX) Pensa	Pensacola, Florida 32526		
December 15 2010		L10000128054		
3. Date of filing/registration in Florida	4. Doc	ument number		
5. (a) Registered Agent and Registered	Office shown on the reco	rds of the Florida Dept. of State:		
Registered Agent:		TATES CORPORATION AGENTS,		
Registered Office Address:	SUITE A	13302 WINDING OAKS BLVD. SUITE A TAMPA, FL 33612 US		
NEW Registered Agent:	<del></del>	d W. Kitt		
NEW Registered Office Address (MUST BE FLORIDA STREET	: 	Deerfield Drive		
		scola ,FL32526		
If the limited liability company is not orgeonfirmed that after the change or change and the business office of the registered a liability company, it is hereby confirmed of the members of the limited liability co or the operating agreement of the limited signature of a member or authorized representative of	es are made, the Florida st agent will be identical. On that the change(s) was/we ompany or as otherwise pro I liability company.	reet address of the registered office		
Signature of a memori of audionized representative of	u momovi	TAR ASS		
Gerald W. Kitt Printed or typed name of signee				
I hereby accept the appointment as regiscomply with the provisions of all statutes and I am familiar with and accept the ob Chapter 608, F.S. Or, if this document is address. I hereby confirm that the limited Signature of Registered Agent	stered agent and agree to a relative to the proper and ligations of my position as being filed to merely refluenced has be	act in this capacity. I fift the agree to decomplete performance of my duties, segment as provided for in lect a change in the registered office en notified in writing of this change.		