L11000010637

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SECRETARY OF STATE

J. SAULSBERRY EXAMINER DEC 12 2011

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Mantodea Studio Name of Limited L	os, LLC Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matt	er to the following:
Anthony Hart Name of Person	·
Mantodea Studios, LLC Firm/Company	2011 DEC -9 SECRETARY TALLAHASSE
P.O. Box 952469 Address	C-9 AM 8:4: ARY OF STATE ASSEE, FLORID
Lake Mary, FL 32795 City/State and Zip Code	The Control of the Co
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please	call:
Anthony Hart at (40)	O7) 575-8410 Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amoun	ıt:
\$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.

1. Name of the limited liability company:Mantod	ea Studios, LLC	
2. (a) Principal office address of limited liability company	: 2587 River Landing Or	
(Note: MUST BE STREET ADDRESS)	Sanford, FL 32771	
(b) Mailing address of limited liability company:	P.D. Box 952469	
(Note: MAY BE POST OFFICE BOX)	Lake Mary, FL 32795	
1/25/2011	L11000010637	
3. Date of filing/registration in Florida	1. Document number	
5. (a) Registered Agent and Registered Office shown on t		
Registered Agent:	Anthony Hart	
Registered Office Address:	821 Shell Ln. Longwood, FL 32750	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	Registered Office address: Anthony Hart	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2587 River Landing Dr. Sanford ,FL 32771	
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and agreements with the provisions of all statutes relative to the provisions of all statutes relative to the provisions of all statutes relative to the provisions.	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of organization	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the proj and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.	
Signature of Registered agent		
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00		