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J. SAULSBERRY EXAMINER SEP 5 2012

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Clear Advertisir	ng and Interactive, LLC Wiability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office O	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	atter to the following:
Jarrett Crawford Name of Person	_ _
The Chear Agency Firm/Company	
2529 Central Ave	——————————————————————————————————————
Soint Polysbug FL 3 City/State and Eip Code	337/3
E-mail address: (to be used for future annual report notification	igency.com
For further information concerning this matter, plea	ase call:
<u>Jarrett Crawford</u> at (727) 489 2332 × 111 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 amo	ount:
\$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: Clear A	dvertising and Interactive LL
2. (a) Principal office address of limited liability company: (<i>Note: MUST BE STREET ADDRESS</i>)	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2529 Central Ave Sait Petersburg FL 33713
5/2/2011 3. Date of filing/registration in Florida 4	L110000 516 29 . Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
Registered Agent:	Highland Productions 110
Registered Office Address:	2529 Central Ave
	Sant Peters burg FZ 33713
(b) Enter name of NEW Registered Agent and/or NEW	Registered Office address:
NEW Registered Agent:	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2529 Central Ave Saint Petersburg, FL 33713
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identically company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise 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 age comply with the provisions of all statutes relative to the provision of all statutes relative to the provision of the obligations of my post. Chapter 608, F.S. Or, if this document is being filed to mercaddress, I hereby confirm that the limited liability company. Signature of Breishred Agent Division of Corporations, P.O. Box 632	ws of the State of Florida, it is hereby wrida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote of a provided in the articles of organization or capacity. If further agree to core and complete performance of my duties, ition as registered agent as provided for in capacity reflect a change in the registered office has been notified in writing of this change.

FILING FEE: \$25.00