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D. BRUCE

JUL 28 2011

EXAMINER

COVER LETTER

то:	Registration Section Division of Corporations			
SUBJECT: Mark Ventures LLC				
	Name of	Limited	l Liability Company	
Dear	Sir or Madam:			
The e	nclosed Registered Agent/Registered	Office (Change and fee(s) are s	ubmitted for filing.
Please	e return all correspondence concernin	g this m	atter to the following:	
	Mark R. Rodweller			
	Name of Person			
	Mark Ventures LLC			
	Firm/Company			
	432 Inglewood Dr.			11 SECTIALLA
	Palm Springs, FL 33461 City/State and Zip Code	···-		HASSEE, FLOR
E-	rodweller@hotmail.com mail address: (to be used for future annual report	notificatio	<u>n)</u>	47 TE IDA
	rther information concerning this mat		•	
	Mark R. Rodweller	at (561)	602-9162
	Name of Person	_	Area Code & Daytim	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRES Registration Section Division of Corporati P.O. Box 6327 Tallahassee, Florida 3	ons
	Enclosed is a check for the followi	ng amo	unt:	
\$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: ___ Mark Ventures LLC 2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 432 Inglewood Dr. Palm Šprings, FL 33461 (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 432 Inglewood Dr. Palm Springs, FL 33461 07/11/2011 L11000079174 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept; of State: Registered Agent: Mark R. Rodweller Registered Office Address: 432 Inglewood Drive Palm Springs, FL 33461; (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> Corporation Service Company **NEW** Registered Agent: **NEW** Registered Office Address: 1201 Hays Street (MUST BE FLORIDA STREET ADDRESS) Tallahassee 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 Mark R. Rodweller 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 I am 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 confirm that the limited liability company has been notified in writing of this change.

> Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00