L11000/06253

(Requestor's Name)		
(Address)		
(Address)		
(133,332)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
·		
(Document Number)		
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Special Instructions to Filing Officer.
A. LUNT

OCT 31 2011

EXAMINER

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COVER LETTER

TO: Registration Section Division of Corporations	. •	
SUBJECT: INNOVATIVE CALLING Name of Limite	Solutions, UC d 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 m	natter to the following:	
ERIC STEPHENSON Name of Person		
INNOVATIVE CALLING Solu Firm/Company	<u> Hions</u>	
5740 CAKESIDE DR. # 3	OQ SECA	2011.0
Margale, FL: 33063 City/State and Zip Code		2011 OCT 28 PL
taz 9576 @ gmail. Con E-mail address: (to be used for foture annual report notification		120
For further information concerning this matter, ple	ase call:	
ERIC STEPHENSON at (754) 235 - 367 4 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:	TIVE CALLING SOLUTIONS, LCC.	
2. (a) Principal office address of limited liability company	v: 5740 Lakeside DR #300	
(Note: MUST BE STREET ADDRESS)	Margate, FL. 32003	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	5740 Lakeside DR #302 Margak, Fl. 38023	
September 6 2011 3. Date of filing/registration in Florida 5. (a) Registered Agent and Registered Office shown on	1.11000106353 4. Document number the records of the Florida Dept. of State:	
Registered Agent:	United STATES Corporation Agusts	
Registered Office Address:	13302 Winding Oak CT. Suite A Tampa, FL. 33612	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :		
NEW Registered Agent:	ERIC Stephenson	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5740 Lakeside De. # 300 Margak FL 33063	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the Franch the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company or the operating agreement of the limited liability company or the operating agreement of the limited liability company. Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the province of the obligations of my positive to the province of the province of the confirmation of the limited liability company. Signature of Registered Agent	derida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization of the articles of organization or	
Division of Corporations, P.O. Box 63	27. Tallahassee, FL 32314	

FILING FEE: \$25.00