## #L 11000107797

(Re	equestor's Name)	<del></del>
(Address)		
(Address)		
(Cir	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
· (Bu	isiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



000215050860

12/16/11--01015--019 \*\*25.00

11 DEC 16 AN II: 48
SECRETARY OF STATE
TALLAMASSES FROM

EXAMINER EXAMINER DEC 20 2011

## **COVER LETTER**

TO:	: Registration Section Division of Corporations			
SUBJ	ECT: <u>Endless Oxname</u> Name of L	imited Liability Company		
Dear S	Sir or Madam:			
The er	nclosed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing.		
Please	return all correspondence concerning t	this matter to the following:		
<u>m</u> 10	Chael Parks Name of Person			
	odless Dynamix LLC Firm/Company			
380	00 70 +h Ave			
Pin	Plas Park FL 337 City/State and Zip Code	781		
Ade	nin G Endless dy namix. Commit address: (to be used for future annual report no	tification)		
For fu	rther information concerning this matte	r, please call:		
_ <i>m_</i>	Chael Parles Name of Person	at ( <u>727</u> ) <u>525-6090</u> 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 amount:			
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

· 64 . . . .

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: <u>Endless</u>	Dynamix LLC
2. (a) Principal office address of limited liability company	1: 3800 70th Ave
(Note: MUST BE STREET ADDRESS)	Pinellas Park FL 33781
(b) Mailing address of limited liability company:	3800 70th Ave
(Note: MAY BE POST OFFICE BOX)	Pinellas Park FL 33781
9/21/2011	611000107797
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:	Joshua R Parks
Registered Office Address:	4961 91st Ave N Unit B PINellas Park FL 33781
	PINEllas Park FL 33781
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	W Registered Office address:
NEW Registered Agent:	Michael Parks
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3800 70th Ave
	Pinellas Park ,FL 33781
If the limited liability company is not organized under the legistered that after the change or changes are made, the Fland 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  Signature of a member of authorized representative of a member  Joshua Parks  Printed or typed name of signee	lorida street address of the registered office
I haveby accept the appointment as registered agent and a	gree to act in this capacity. Burther agree to
comply with the provisions of all statutes relative to the proceed and I am familiar with and accept the obligations of my post that the first the colling filed to me address. I hereby configuration that the limited liability company	Sper and complete performant of I neglities, sition as registered agent as provided for in rely reflect a change in the registered office whas been notified in writing of this change.
Signature of Registered Agent	