## L11000114632

(Re	equestor's Name)	
(Address)		
(Ad	ldress)	
(Ci	ty/State/Zip/Phone	. #\
(CI	ly/Otate/Zip/Filone	<del>, π,</del>
. PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(		,
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
·		

Office Use Only



300215059433

12/19/11--01017--001 \*\*25.00

2011 DEC 19 PH 12: 09

T. HAMPTON

· 3 0 2011

EXAMINER

## · COVER LETTER

Division of Corporations			
SUBJECT: Digital Curio LLC  Name of Limited 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 matter to the following:			
Hanna Palmer Name of Person			
Digital Curio LLC Firm/Company			
8922 Canopy Coks Dr.			
TOCKSONILLE, FL 32256  City/State and Zip Code			
hanna balmere digital curio. Com  E-mail address: (to be used for future annual seport notification)			
For further information concerning this matter, please call:			
Hanna Parmor at (904) 404 - 9904  Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  Enclosed is a check for the following amount:			
\$25 Filing Fee \$25 Filing Fee & Certified Copy			

TO: Registration Section

## 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: Digital (	urio LLC
2. (a) Principal office address of limited liability company	: 8922 Canopy Oaks Dr.
(Note: MUST BE STREET ADDRESS)	Jacksonville, FL 32256
(b) Mailing address of limited liability company:	8922 canapy caks or
(Note: MAY BE POST OFFICE BOX)	Jacksonville, FL 3225
10/0/11 2 De 6611 / 1 in Florida	L11000114U32
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:
Registered Agent:	Hanna L. Palmer
Registered Office Address:	7845 Baymeadows Way Jacksonville FL 32256
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV NEW Registered Agent:</u> <u>NEW Registered Office Address:</u>	V Registered Office address: Hanna L. Palmor 8922 Canopy Oaks Dr.
(MUST BE FLORIDA STREET ADDRESS)	Dacksonville ,FL 3225U
If the limited liability company is not organized under the l confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identiliability 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  I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the province of the complex of the province of the company of the province of the company of	orida 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.

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