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S. PRATHER

COVER LETTER

TO:	Registration Section Division of Corporations					
elib it	Liberty Book Store LLC	·				
SUBJE		Name of Limited Liability Company				
Dear Si	ir or Madam:					
The end	closed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.			
Please	return all correspondence concerning thi	s matter to the f	ollowing:			
Thorn	ne Donnelley					
	Name of Person		- .			
Libert	y Book Store LLC					
	Firm/Company					
4237	East Main Street					
	Address		_			
Jupite	er Florida 33458					
	City/State and Zip Code		_			
thorne	e@libertybookstore.com					
E	-mail address: (to be used for future ann	ual report notifi	cation)			
For fur	ther information concerning this matter,	please call:				
Thorn	e Donnelley	561	389-5321			
	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	Reg Div P.O	alLING ADDRESS: gistration Section ision of Corporations b. Box 6327 Itahassee, Florida 32314			
	Enclosed is a check for the following	amount:				
	☑ \$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy			
INHS18	8 (2/14)					

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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 M.s	me of the limited liability company:	Store L	LC			
 Na (a) 	Liberty Book Store LLC		Libert	y Book Store LLC		
±. (4) .	Principal office address of limited liability company:	_ ``	(b)			
	(Note: MUST BE STREET ADDRESS) 8295 North Military Trail Ste D		8295	North Military Trail		<u>c 60.0</u>
	West Palm Beach, FL 33410		West	Palm Beach, FL 33	3410	
	10/20/11		L11000)119861		
3.	Date of filing/registration in Florida Thorne Donnelley	4.	-	Document number	•	
5. (a)	Registered Agent and Registered Office shown on the records of t	he Florid	a Dept. of S	itate:		
	Registered Office Address (MUST BE FLORIDA STREET A 8295 North Military Trail Ste D	DDRES.	<u></u> <u>S)</u>		٠	18
		33410)		•	SEP 34
(h)	Enter name of NEW Registered Agent and/or NEW Registered	Office at	tdress:			-P
	Fines hand of Att. W. Registered Agent and/or Art. W. Registered	VIIICE &C	<u> </u>		,	2:58
	NEW Registered Office Address:					
	4237 East Main Street					
	Jupiter , FL	33458	}			
the cha agent w was/we	imited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regionality confirmation that the limited	istered of ompany, nited liab	fice and the business of it is hereby confirmed ility company or as off company.	office of t that the o	he registered change(s)
Signat	aire of a member or authorized representative of a member	-	•	Printed or typed name	of signee	
provisi the obli to mere	by accept the appointment as registered agent and agrons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have the change of this change.	ee to ac perforn l for in hereby c	t in this c nance of n Chapter t confirm th	apacity. I further agr ny duties, and I am far 505, F.S. Or, if this do at the limited liability	ec to com niliar wit ocument i company	iply with the h and accept is being filed c has been
Signatur	re of Registered Agent					

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