## L11000130865

(Paguastaria Nama)		
(Requestor's Name)		
(Address)		
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(O'b (Ob to 77) (D) 40		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
, ,		
(December 1)		
(Document Number)		
Certified Copies Certificates of Status		
Charles landward to Filing Officer		
Special Instructions to Filing Officer:		
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Office Use Only		

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EXAMINER



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SECRETARY OF STATE

ON ISIGH OF CORPORATION



TO: Registration Section Division of Corporations	·. •	
SUBJECT: Down To Early Name of Limited	Liability Company	
Dear Sir or Madam:	三	
The enclosed Registered Agent/Registered Office (	Change and fee(s) are submitted for filing	
Dear Sir or Madam:  The enclosed Registered Agent/Registered Office Office Office Please return all correspondence concerning this materials.	atter to the following:	
Melissa Meclellan Name of Person	<b>*</b>	
Down to Earth Yoga Firm/Company	Studic LLC	
1981 Se Port St Were	= Blvd	
Port 5t Lucie FL 31 City/State and Zip Code	1952	
down to Ently yogg Styd E-mail address: (to be used for future annual report notification	o Ogmail . com	
For further information concerning this matter, please call:		
Melissa Mcclelland at (	772 418-5050 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

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.

J		
1. Name of the limited liability company: Daun -	to Earth logg Studio LLC	
2. (a) Principal office address of limited liability company	y: 1981 SE POUF St	
(Note: MUST BE STREET ADDRESS)	Lucie Blud. Building. A	
(b) Mailing address of limited liability company:	Port St Lucie FL	
(Note: MAY BE POST OFFICE BOX)	<u>34952.</u>	
8-12-2012  3. Date of filing/registration in Florida	L11000 130 863	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	Tonya L Bleneth	
Registered Office Address:	1756 SE CLEANMONDE St part St Lucie FL 34983	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  NEW Registered Agent  MeLissa McClelland		
NEW Registered Agent:  NEW Registered Office Address:  (MUST BE FLORIDA STREET ADDRESS)	Melissa Michelland  1981 SE port St Cucie  Blud Building - A Port St  Lucie FL 34952	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization of the case of t	
Printedor typed name of signee	PH 12: 1:	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my por Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company.	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.	
Signature of Registered Agent		

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