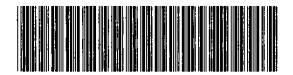
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	(Reque	stor's Name	:)		
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Special Instructions	to Filin	g Officer:			
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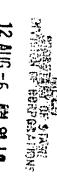
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Office Use Only

B. KOHR

AUG - 8 2012

EXAMINER



COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: 4TH ESTATE, LLC				
Name of I	Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning	this matter to the following:			
John H. Evans				
Name of Person				
John H. Evans, P.A.	 			
Firm/Company				
1702 S. Washington Ave.				
Address				
Titusville, FL 32780				
City/State and Zip Code				
fvega@sfchronicle.com E-mail address: (to be used for future annual report to	notification)			
For further information concerning this matt	ter, please call:			
John H. Evans	at (321)267-5504			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314			
Enclosed is a check for the following	ng 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.

Name of the limited liability company:	4TH ESTATE, LLC や
• •	
2. (a) Principal office address of limited liability company	See S. ATLANTIC AVENUES
(Note: MUST BE STREET ADDRESS)	COCOA BEACH, FL 32932
(b) Mailing address of limited liability company:	399 S. ATLANTIC AVENUE 💪
(Note: MAY BE POST OFFICE BOX)	COCOA BEACH, FL 32932
11/22/11	L11000132790
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:	Capitol Corporate Services, Inc.
Registered Office Address:	155 Office Plaza Drive
	Suite A Tallahassee, FL 32301
	Tallallassee, I L O200
(b) Enter name of NEW Registered Agent and/or NEV	W Registered Office address:
NEW Registered Agent:	John H. Evans
NEW Registered Office Address:	John H. Evans, P.A.
(MUST BE FLORIDA STREET ADDRESS)	1702 S. Washington Ave. Titusville,FL32780
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 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 John H. Evans 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 presentative of the presentative of the presentative of the presentative to the presentative to the presentative of the presentative to the presentative t	was/were authorized by an affirmative vote wise provided in the articles of organization
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my po Chapter 608, If.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.

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

Signature of Registered Agent