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COVER LETTER

TO: Registration Section Division of Corporations	•	
SUBJECT: DYMAK USA, L	LC	
Name of Li	imited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning the	his matter to the following:	
Donna L. Draves, Esq.	·-···	
The Draves Law Firm, P.	.A.	
120 E. Concord Street Address Orlando, FL 32801 City/State and Zip Code Rene@draveslawfirm.co E-mail address: (to be used for future annual report no		
For further information concerning this matter	r, please call:	
Name of Person	at (407) 423-1103 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	g 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.

1. N	lar	ne of the limited liability company: DYMAK USA, LLC					
2. (8	a)	Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	120 E. Concord Street Orlando, FL 32801	75.7			
(l	b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	120 E. Concord Street Orlando, FL 32801	FILE D			
11/22/	'11		L11000132811	FISTAT			
3. D	at	e of filing/registration in Florida	4. Document number	Sm -			
5. ((a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
		Registered Agent:	Georgiev, Bissser				
		Registered Office Address:	2009 Marden Road Apopka FL 32703 US				
(l	b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	V Registered Office address Donna L. Draves, Esq.	<u>3</u> :			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	120 E. Concord Street	· · · · · · · · · · · · · · · · · · ·			
			Orlando	,FL 32801			
conf and liabi the r the c	in the lit ne	imited liability company is not organized under the laned that after the change or changes are made, the Flee business office of the registered agent will be identify company, it is hereby confirmed that the change(s) imbers of the limited liability company or as otherwise eating agreement of the limited liability company.	orida street address of the reg cal. Or, in the case of a Flor was/were authorized by an a	gistered office ida limited ffirmative vote of			
		Draves, Esq. or typed name of signee	-				
		by accept the appointment as registered agent and as which the provisions of all statules relative to the pro am familiar with and accept the obligations of my pos er 608, F.S. Or, if this document is being filed to men as I hereby confirm that the limited liability company	gree to act in this capacity. If per and complete performan sition as registered agent as ely reflect a change in the re has been notified in writing	further agree to ce of my duties, provided for in gistered office of this change.			

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

Signature of Registered Agent