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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: FIXOlogy 1 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:				
Marthew Evacue Name of Person				
Firm/Company				
901 N. Congress Aue Ste B-101				
Boynton Blach FL 33424 City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Melane Frest at (877) 7218033 Name of Person Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: MAILING ADDRESS:				

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

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.

1.	Nai	me of the limited liability company: <u>fxof og</u>	41 LLC
		Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: 901 N Congress Ave Ste B-101 Baynton Beach FL 33426
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	P.O. Box 4261 Baynton Beach FL 33424-4261
	12	127/11	L1100014439 至
3.	Dat	e of filing/registration in Florida	4. Document number
5.	(a)	Registered Agent and Registered Office shown on	the records of the Florida Dept. of State
		Registered Agent:	Matthew Evacel = =
		Registered Office Address:	2790 Windham & Delroy Benis FC 33445
	<i>(</i> 1.)		
	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :		
		<u>NEW</u> Registered Agent:	Mathew Evalle
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	901 N Congress Aug Ste B-101 Bainton Beach FL 33426
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.			

Signature of a member of authorized representative of a member

Mathew Evacer
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608. F.S. Or. if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent