1200039036

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
, ,			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



500247804755

05/20/13--01010--023 **25.00

2013 KAY 20 PM 3: 10
SECRETARY BF STATE
ALLAHASSEE, FLORIDA

HAY 21 2013 T CLINE

COVER LETTER

TO: Registration Section
Division of Corporations

Team You - The Online Store

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:

Morian Shaw

Name of Person

Team You - The Online Store

Firm/Company

PO Box 6055

Address

Virginia Beach, VA 23453

City/State and Zip Code

m123shaw@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Morian Shaw

...813

365-1682

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

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

INHS18 (5/08)

2013 KAY 20 PM 3: 1

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: Team You - The Onlin	e Store, LLC	
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	su 634 Tomoka Pood	
	Daytona Beach, FL 32114	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	PO BOX 6055	
	Virginia Beach, Virginia 23458-8055	
		
March 20, 2012	L12000039036	
3. Date of filing/registration in Florida	4. Document number	2013 2013
(a) Registered Agent and Registered Office shown on	the records of the Florid	la Dept-of State:
Danistand Asset		
Registered Agent:	Morian Shaw	
Registered Office Address:	634 Tornoka Road	
Registered Office Address.	Virginia Beach, VA 23453	(2)
		- 意。
		9m B
(I) F		-
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office ac	<u>ldress</u> :
NEW Registered Agent:	Same	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Same (Possible Transition to Virginia Beach Home Office)	
	634 Tomoka Road	
	Daytona Beach	FL 32114
		······································
If the limited liability company is not organized under the confirmed that after the change or changes are made, the Fand the business office of the registered agent will be identiability company, it is hereby confirmed that the change(sthe members of the limited liability company or as otherwise operating agreement of the limited liability company.	Florida street address of t tical. Or, in the case of a b) was/were authorized by	he registered office a Florida limited v an affirmative vote of
Signature of a member or authorized representative of a member	_	
Morian Shaw		
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 pr	agree to act in this capac	city. I further agree to
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pland I am familiar with and accept the obligations of my perchapter 608, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability compared Signature of Registered Agent	roper and complete perfo osition as registered age erely reflect a change in ny has been notified in w	ormance of my duties, nt as provided for in the registered office riting of this change.

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