1120000 73911

(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:					





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COVER LETTER

	sistration Section ision of Corporations		
SUBJECT:	Marriage Material LLC		
		ime of Limited L	iability Company
Dear Sir or	Madam:		
The enclose	d Registered Agent/Registered O	ffice Change and	fee(s) are submitted for filing.
Please retur	n all correspondence concerning t	his matter to the	following:
Ann Fishmai	ı, Esquire		
	Name of Person		
Fishman Lav	v PŁLC		
	Firm/Company		
550 Okeecho	bbee Blvd. Apt. 1723		
	Address	-	
West Palm B	Beach, Florida 33401		
	City/State and Zip Code		-
ann@fishma	n.law		
E-mai	l address: (to be used for future ar	nual report notif	ication)
For further i	information concerning this matte	r, please call:	
Ann Fishmai	1	561 at (310-8822
	Name of Person	(Area Code & Daytime Telephone Number
Reg Div P.C	iling Address: gistration Section vision of Corporations D. Box 6327 lahassec, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enc	closed is a check for the followin	g amount:	
□ S	25 Filing Fee	□ \$	55 Filing Fee & Certified Copy
INHS18 (2/1	4)		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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	ame of the limited liability company: Marriage Mat	erial, LLC		
2. (a)			(b)	
(-,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		· /	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	500 South Australian Avenue Suite #500		Same as	Principal Office Address
	West Palm Beach, Florida 33401			
	6/4/2012		L1200007	3911
3.	Date of filing/registration in Florida	4.		Document number
5. (a)			
J. (a	Registered Agent and Registered Office shown on the record	ls of the Flori	da Dept. of St	ate:
	Ann. Fishman Liberty Productions	LLC		_
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRE.	<u>5.5)</u>	
	340 Royal Poinciana Way Unit 317/319			_
	Palm Beach	, FL		-
		, l'L		-
(b)				
	Enter name of NEW Registered Agent and/or NEW Regist	ered Office a	iddress:	 1
	Fishman Law PLLC			Ğ
	NEW Registered Office Address:			
	500 South Australian Avenue Suite #500			
	West Palm Beach	. FL 33401		
chang agent was/w	limited liability company is not organized under the e or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the membericles of organization or the operating agreement of	the registed liability of the linited the limited	red office a company, it mited liabil	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany.
Sign	ature of a member or authorized representative of a member			Printed or typed name of signee
provis the ob to men notific	eby accept the appointment as registered agent and sions of all statutes relative to the proper and completions of my position as registered agent as provedly reflect a change in the registered office addressed in writing of this change.	agree to a lete performided for in the thereby	at in this cap nance of my Chapter 60 confirm tha	pacity. I further agree to comply with the duties, and I am familiar with and accept 15, F.S. Or, if this document is being filed the limited liability company has been

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