L12000076443

(Re	questor's Name)						
(Ad	dress)						
(A d	dress)						
(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	_ Certificates	s of Status					
Special Instructions to Filing Officer:							

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C. LEWIS
DEC 1 8 2012
EXAMINER

December 12, 2012

To Whom It May Concern,

I've included the official forms for this request. I am seeking to add our physical address to your records.

In Channel Marketing, LLC.

Physical Address: 2826 East Oakland Park Boulevard Suite 210 Fort Lauderdale, FL 33306

Mailing Address:

1314 East Las Olas Boulevard Unit 183 Fort Lauderdale, FL 33301

Regards,

David Blake

Managing Partner

In Channel Marketing LLC.

dblake@inchannelmarketing.com

954-801-8061

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: In Channel Marketing, 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:

David Blake

Name of Person

In Channel Marketing, LLC.

Firm/Company

1314 East Las Olas Boulevard, Suite 183

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

dblake@inchannelmarketing.com

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

For further information concerning this matter, please call:

David Blake

_a,954 \801-8061

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

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.	Nar	ne of the limited liability company: In Channel M	Marketing, Ll	.c.			
2.	(a)	a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		2826 East Oakland Park Boulevard, Suite 210 Fort Lauderdale, FL 33306			
	(b)	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)		1314 East Las Olas Boulevard, Unit 183 Fort Lauderdale, FL 33301			
Ju	ne 8, 2	012		L12000076443			
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							
Registered Agent: James D. Bass			James D. Bass		<u>-</u> _		
		Registered Office Address:		1314 East Oakland Park Boulevard Unit Fort Lauderdale, FL 33301	183 2012 DEC	DIVISION DI	
	(b)	Enter name of <u>NEW Registered Agent</u> and/ <u>NEW Registered Agent</u> :	or <u>NEW</u>	Registered Office address:	17 MI	ARY OF ST	
		NEW Registered Office Address:	· ·	2826 East Oakland Park Boulevard, Suite 21	0: 23 2: 23	1987	
		(MUST BE FLORIDA STREET ADDRES	<u>ত্</u> য	Fort Lauderdale ,	FL_33306		
co an lia th th	nfirr d the bilit e me e ope	imited liability company is not organized und med that after the change or changes are made business office of the registered agent will by company, it is hereby confirmed that the chambers of the limited liability company or as cerating agreement	e, the Flo be identic lange(s) v	rida street address of the regist al. Or, in the case of a Florida was/were authorized by an affir	ered off limited mative	vote of	
Da Pr	vid Bla	Managing Partner or typed name of signee by accept the appointment as registered agen y with the provisions of all statutes relative to am familiar with and accept the obligations of er 608, F.S. Or, if this document is being file is, I hereby confirm that the limited liability of	nt and ag the prop f my posi d to merc ompany	ree to act in this capacity. I fu per and complete performance ition as registered agent as pro ely reflect a change in the regis has been notified in writing of	rther ag of my di ovided fo stered of this châ	ree to uties, or in fice nge.	
		$\lambda \gamma$					

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

Signature of Registere Agent