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## COVER LETTER

TO: Registration Division of	n Section f Corporations	
SUBJECT:	Traveling Nou	s LLC
	Name of Lim	illed Liability Company
Dear Sir or Madan	n:	
The enclosed Regi	stered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.
Please return all co	orrespondence concerning thi	s matter to the following:
<u>Gary</u>	B. Hollarin Name of Person	<del></del>
Traveli	Mow LLC Firm/Company	
704 E.M	ady Blw. Ste	. 448
Bunnell,	FL 32110 City/State and Zip Code	
E-mail address: (to	o be used for future annual report notifi	ication)
For further inform	ation concerning this matter,	please call:
Gary 6. 1	Hollarin a	1(384) 283-7491
Nam	ie of Person	Area Code & Daytime Telephone Number
STREET/C	COURIER ADDRESS:	MAILING ADDRESS:
Registration	Section	Registration Section
	Corporations	Division of Corporations
	Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314	
	Florida 32301	i dilailassee, i loi lua 32314
Enclosed i	s a check for the following a	amount:
\$25 Fili	ng 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. Name of the limited liability company:	ing Now, LLC
2. (a) Principal office address of limited liability compan	y: 704 E. Moody Blud # #4
(Note: MUST BE STREET ADDRESS)	Bunnell, FL 32110
(b) Mailing address of limited liability company:	704E. Moody Blud #448
(Note: MAY BE POST OFFICE BOX)	Bunnell, FL 32110
7-31-2012	L/200009858
3. Date of filing/registration in Florida	4. Document number 表示
5. (a) Registered Agent and Registered Office shown on	the records of the Florida DepF of State
Registered Agent:	Gary B. Hollarity 5
Registered Office Address:	4750 E. Mordy Boo #5205 Bunnell, Fr 3210
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> : <u>NEW Registered Office Address:</u>	W Registered Office address:  Gary B. Hollarin  704 E. Moody Blvd. #448
(MUST BE FLORIDA STREET ADDRESS)	Bunnell ,FL 32110
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be identiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	Florida street address of the registered office atical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization
Canblollary	
Printed or typed name of signee	_
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pi and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address, I hereby confirm that the limited liability compar	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office sy has been notified in writing of this change.
Signature of Registered Agent	

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