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SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROVED AND FILED

D. BRUCE

SEP 27 2012

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	SUBJECT: Pureality Entertainment, LLC Name of Limited Liability Company				
Dear S	Sir or Madam:				
The er	nclosed Registered Agent/Registered	Office C	Change and fee(s) are submitted for filing	g.	
Please	return all correspondence concerning	g this ma	atter to the following:		
	Marc Batista		****		
	Name of Person				
	Pureality Entertainment, LL Firm/Company	<u>.C</u>		SECRI	1
	4327 Stonefield Drive			HASSE	
	Address				
	Orlando, Florida 32826 City/State and Zip Code			IATE ORIDA	f
E-	marc batista@hotmail.com	m notificatio	on)		
For fu	rther information concerning this man	tter, plea	ase call:		
	Marc Batista	at (407) 968-6348		_
	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 follow	ing amo	ount:		
	\$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. Name of the limited liability company:	Pureality Entertainment, LLC			
. (a) Principal office address of limited liability company:				
(Note: MUST BE STREET ADDRESS)	4327 Stonefield Drive Orlando, Florida 32826			
(b) Mailing address of limited liability company:				
(Note: MAY BE POST OFFICE BOX)	4327 Stonefield Drive Orlando, FL 32824			
8/24/2012	L12000109947			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shows	on the records of the Florida Dept. of State:			
Registered Agent:	Marc Batista			
Registered Office Address:	4327 Stonefield Drive ≥ ∽			
	Orlando, Florida 32826			
(b) Enter name of NEW Registered Agent and/or	NEW Registered Office address: SSECTION PARCED			
<u>NEW</u> Registered Agent:	InCorp Services, Inc. + + + + + + + + + + + + + + + + + + +			
NEW Registered Office Address:	ORIL OZ			
(MUST BE FLORIDA STREET ADDRESS)	17888 67th Court North			
	Loxahatchee, Florida ,FL33470			
If the limited liability company is not organized under confirmed that after the change or changes are made, t and the business office of the registered agent will be liability company, it is hereby confirmed that the chan of the members of the limited liability company or as or the operating agreement of the limited liability com Signature of a member or authorized representative of a member	the Florida street address of the registered office identical. Or, in the case of a Florida limited			
Marc Batista				
Printed or typed name of signee				
I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of m Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability com	and agree to act in this capacity. I further agree to be proper and complete performance of my duties, by position as registered agent as provided for in a merely reflect a change in the registered office apany has been notified in writing of this change.			

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