## <u>L12000128367</u>

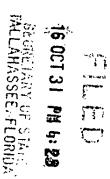
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## COVER LETTER

Division of Corporations					
SUBJECT: ARTOMIC LLC					
	f 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 ma	·				
Andrew Goldman					
Name of Person	·				
ARTOMIC LLC					
Firm/Company					
2234 Taft Vineland Rd.					
Address					
Orlando, FL. 32837					
City/State and Zip Code					
andyg@artomicbrands.com					
E-mail address: (to be used for future annual i	report notification)				
For further information concerning this matter, plea	ase call:				
Andrew Goldman	727 251-5332				
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 (2/14)					

## 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. Na	ame of the limited liability company: ARTOMIC L	.LC	
2. (a)	2234 Taft Vineland Rd.	(b) 223	4 Taft Vineland Rd.
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(9)	Mailing address of limited liability company:
	Orlando, FL. 32837	Orlo	(Note: MAY BE POST OFFICE BOX)
	Onlando, 1 E. 02007	Ona	Indo, FL. 32837
**************************************			and the second s
	10/09/2012	L120	00128367
i.	Date of filing/registration in Florida	4.	Document number
. (a)	Billy Campisciano		
. (a)	Registered Agent and Registered Office shown on the records of	of the Florida Dept. o	of State:
	1419 S. MLK Jr. Ave		
	Registered Office Address (MUST BE FLORIDA STREET	(ADDRESS)	<del></del>
	Clearwater	33756	 음을 <b>'하</b> '
(b)	Andrew Goldman		OCT &
(0)	Enter name of NEW Registered Agent and/or NEW Registere	ed Office address:	SSE 2 1
	2234 Taft Vineland Rd.		
	NEW Registered Office Address:		RIDA
			<del></del>
	Orlando , F	<sub>L_</sub> 32837	
he cha gent v vas/ym	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members ides of organization or the operating agreement of the	of the registered liability company s of the limited lis	office and the business office of the registere y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company.
Signa	ture of a member or authorized representative of a member	7110104	Printed or typed name of signee
rovisi he obi o mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complei ligations of my position as registered agent as provid ely reflect a change in the registered office address, d in writing of this change.	gree to act in this te performance o ded for in Chapte I hereby confirm	s capacity. I further agree to comply with the f my duties, and I am familiar with and acce fr 605, F.S. Or, if this document is being file that the limited liability company has been