L13000026482

(Requestor's Name)		
(Address)		
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PICK-UP WAIT MAIL		
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(Document Number)		
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B. BOSTICK MAR - 4 2013

FNAMINITA

TO: Registration Section Division of Corporations	•		
SUBJECT: Worldwide Diversified Auctions I Name of Limited Liability Company	LLC	_1	
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:			
Worldwide diversified Auctions LLe, Firm/Company			
1422 NE. 10 44 2 a Address	ĨĂĹĬ	13	
Cape Coral Fl 33909 City/State/and Zip Code	AHASSEE	MAR -1	patricipal pro-patri pro-patricipal
E-mail address: (to be used for future annual report notification)	FLORIDA	PH 3: 32	
For firsther information concerning this motter places call.	-		

For further information concerning this matter, please call:

Same as aboute at (1'')

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.

4.1 11 3	15 11
1. Name of the limited liability company: Worldwig	de Viversitied Huctions LLC
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	1422 NE. 10 MLn Cape Corel, Fl. 33909
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1472 NE. 1044 LN Cupe Coral F1 33909
2/20/2013 3. Date of filing/registration in Florida	L 130000 2 6 482 4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Legal Zoom
Registered Office Address:	101 N. Brand Blut., 11th Floor 6120 date, CA. 91203 (323) 967-8600
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	William B. Hartman
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1422 NE. 70 4 1 N Cape Coral, Fl 33909 FL
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwithe operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of this document is being filed to me address. I hereby confirm that the limited liability company	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of se provided in the articles of organization or
Signature of Registered Agent	

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