

7  
L130000078055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

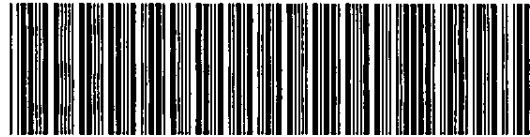
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JUL 29 2013  
FRI 09:10A

J. SAULSBERRY  
EXAMINER  
AUG 14 2013

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: My Switch LLC.  
Name of Corporation

DOCUMENT NUMBER: L13000078055

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Reid Shapiro  
Name of Contact Person

Elephant Group, inc.  
Firm/Company

5259 coconut creek pkwy  
Address

Margate, FL 33063  
City/State and Zip Code

rshapiro@elephantgroup.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Reid Shapiro at (954) 657-9600  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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: My Switch LLC
2. (a) Principal office address of limited liability company: 5259 Coconut Creek Pkwy  
(Note: **MUST BE STREET ADDRESS**) Margate, FL 33063
- (b) Mailing address of limited liability company: (Same as above)  
(Note: **MAY BE POST OFFICE BOX**)
3. Date of filing/registration in Florida: 05/29/2013
4. Document number: L13000078055

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Michael Wallace

Registered Office Address:

5259 Coconut Creek Parkway

Margate, FL 33063

- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent:

Reid Shapiro

**NEW** Registered Office Address:

5259 Coconut Creek Pkwy

(**MUST BE FLORIDA STREET ADDRESS**)

Margate, FL 33063

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member of authorized representative of a member

Reid Shapiro

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00