

L13000 116 779

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

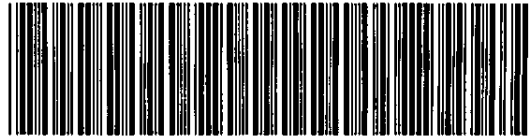
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA  
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JAN 07 2015  
T. CARTER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DIGGIN IT LLC  
Name of 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 matter to the following:

ROBERT G SCHOFIELD  
Name of Person

DIGGIN IT LLC  
Firm/Company

PO Box 1871  
Address

BELLEVUE FL 34421  
City/State and Zip Code

EDBURNS317@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EDWARD BURNS at ( 352 ) 454-6527  
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 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. Name of the limited liability company: DIGGIN' IT LLC
2. (a) 3996 SW 138TH PL Ocala FL 34473 (b) PO Box 1871 BELLEVUE FL 34421  
 Principal office address of limited liability company: Mailing address of limited liability company:  
 (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. 9/1/2013 Date of filing/registration in Florida 4. L13000116779 Document number

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

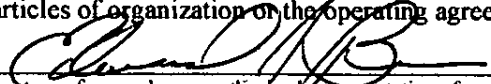
PO Box 1871 BELLEVUE FL 34421  
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
3996 SW 138TH PL  
OCALA, FL 34473

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

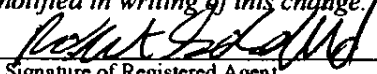
~~PO Box 1871 BELLEVUE FL 34421~~  
 NEW Registered Office Address:  
3996 SW 138TH PL  
OCALA, FL 34473

FILED  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
 14 DEC 29 PM 2:55

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 or authorized representative of a member EDWARD J BURNS Printed or typed name of signee

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 605, 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