## L140000112112

(Requestor's Name)				
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(Cit	ty/State/Zip/Phone #	F)		
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☐ ЫСК-ПЬ	WAIT	MAIL		
(Bu	siness Entity Name	)		
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Certified Copies	_ Certificates o	f Status		
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Special Instructions to Filing Officer:				
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## **COVER LETTER**

TO: Registration Section

INHS18 (2/14)

Divi	sion of Corporations			
SUBJECT:	MURRAY COURT REPOR	TING, LLC		
SUBJECT.	Name of Limited Liability Company			
Dear Sir or N	Madam:			
The enclosed	d Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.	
Please return	all correspondence concerning th	is matter to the	following:	
LAWREN	CE M. MURRAY			
	Name of Person	·	_	
MURRAY	COURT REPORTING, LLC			
	Firm/Company		<del></del>	
412 MADI	SON STREET, SUITE 1104			
	Address		<del></del>	
TAMPA, F	LORIDA 33602			
	City/State and Zip Code		_	
LMURRAY	Y@MURRAYCRPRO.COM			
E-mail	address: (to be used for future ann	iual report notif	ication)	
For further in	nformation concerning this matter,	, please call:		
LARRY M	URRAY	813	225-1666	
	Name of Person		Area Code & Daytime Telephone Number	
Regi Divi: Clift 2661	stration Section sion of Corporations on Building Executive Center Circle whassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Encl	osed is a check for the following	amount:		
<b>2</b> \$2	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.

Name of the limited hability company:	PORTING, LLC	
Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  TAMPA, FLORIDA 33602	(0)	412 MADISON STREET, STE 1104  Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)  TAMPA, FLORIDA 33602
05/01/2014  Date of filing/registration in Florida		14000071272  Document number
LAWRENCE M. MURRAY		
Registered Agent and Registered Office shown on the records  1875 N. BELCHER ROAD	of the Florida D	Pept. of State:
Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	
CLEARWATER	33765	6 22 6 22
LAWRENCE M. MURRAY		FILED MIG 12 NIG 22 MIG 12 NIG 22 MIG 12 NIG 21 MIG 12
Enter name of NEW Registered Agent and/or NEW Register	ed Office addr	Salar C
412 MADISON STREET, SUITE 1104		> 2
NEW Registered Office Address:		
TAMPA	L 33602	
limited liability company is not organized under the hange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the memberatiles of organization or the operating agreement of the memberation of the operation of the memberation of the operation of the op	aws of the S of the registe liability com s of the limite he limited lia	ered office and the business office of the regis spany, it is hereby confirmed that the change(seed liability company or as otherwise provided
nature of a member or authorized representative of a member		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