

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name : BUSINESS FILINGS Account Number: 105256001620 Phone : (608)827-5300 : (608)827-5501 Fax Number

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REGISTERED AGENT CHANGE

LATTLE ME RETAIL STORES OF ELLENTON, FLORIDA LLC

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions liability company submits to agent, or both, in the State of	of sections 608.416 or 608.5 he following statement in order of Florida	508, Florida Statutes er to change its regi	the undersigned limited stered office or registered
1. The name of the limited	liability company is: Little Me R	Retail Stores of Ellenton,	· -> U
2. The mailing address of the	he limited liability company is	· 	TALLES MARKET STATE
12101 Upper Potomac Industria	al Park, Cumberland, Maryland 2150	2	LORIDA
6/13/2002		M02000001529	
3. Date of filing/registration	n in Florida	Florida 4. Document number	
5. The name of the registere Florida Department of Sta	ed agent and the registered office	e address as shown o	on the records of the
-	Corporation Service Company		
_	Name		
:	1201 Hays Street		
Address			
Tallahassee, Florida 32301			
_	City, State and	Zip	
6. The name and address of the new registered agent and/or office:			
_ 1	Business Filings Incorporated		
:	Name 1203 Governors Square Blvd, Suite 1	01	
	Florida street address (P.O. Box	x NOT acceptable)	
	allahassee FL 323		
	City, State and Zi	ip	
confirmed that after the char and the business office of the liability company, it is hereb the members of the limited li	any is not organized under the lange or changes are made, the Flee registered agent will be identify confirmed that the change(s) iability company or as otherwishe limited liability company.	orida street address of ical. Or, in the case of was/were authorized	of the registered office of a Florida limited by an affirmative vote of
(Signature of a member or suthorized	representative of a member)	•	
Ronald W. Smart, VP of Finance	e		
(Printed or typed name of signee)		-	
I hereby accept the appoints comply with the provisions of and I am familiar with and a Chapter 608, F.S. Or, if this address, I hereby confirm the	ment as registered agent and as of all statutes relative to the pro iccept the obligations of my pos of document is being filed to mer at the limited liability company	gree to act in this cap oper and complete per sition as registered a rely reflect a change has been notified in	acity. I further agree to rformance of my duttes, gent as provided for in In the registered office writing of this change.

(Signature of Registored Agent) (Sixings Filings Incorporated, Mark Schiff, AVP

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

INHS18(10/99)

FILING FEE: \$25.00