## M0400001771

	AS	i
Registered Agent Solutions, inc  515 Congress Avenue   Suite 2300   Austin, TX 78701		
<u> </u>		
(Address)		
(Cir	ty/State/Zip/Phone	<del>;</del> #)
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(Document Number)		
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**EXAMINER** 



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SECRETARY OF STATE
SALLAHASSEE, FLORID

January 26, 2011

## **VIA US REGULAR MAIL**

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: <u>CDC Publishing, LLC</u>

Dear Sir or Madam:

On behalf of the above-referenced entity, enclosed please find the following for filing with the Florida Secretary of State:

- 1 One original (1) and one (1) copy of Change of Registered Agent/Address form;
- 2 \$35.00 to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (512) 480-9131.

Respectfully,

REGISTERED AGENT SOLUTIONS, INC.

Leana Guzman

## 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.

Name of the limited liability company:	CDC PUBLISHING, LLC		
2. (a) Principal office address of limited liability compan	y: 2001 9TH AVENUE		
(Note: MUST BE STREET ADDRESS)	SUITE 209 VERO BEACH FL 32960		
(b) Mailing address of limited liability company:			
(Note: MAY BE POST OFFICE BOX)			
05/10/2004	M0400001771		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
Registered Agent:	C T CORPORATION SYSTEM		
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:			
NEW Registered Agent:	Registered Agent Solutions Inc.		
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	155 Office Plaza Dr. Suite A Tallahassee ,FL32301		
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 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 statules relative to the prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability companies. I hereby confirm that the limited liability companies of Registered Agent	agree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.		

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