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\*3PR-05-2007

Florida Department of State

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## REGISTERED AGENT CHANGE

SIT BACK & RELAX, LLC

Certificate of Status	0
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections by liability company submits the following s agent, or both, in the State of Florida.	508.416 or 608.508, Florida Statutes, the undersigned lim statement in order to change its registered office or registe	ited ered
	Dit Danis C Dalass LLA	

1. The name of the limited liability company is:		Sit Back & Relax, LLC		
2. The mailing address of the lim New Hampshire 03110-6929	ited liability co		edford,	
3/1/2005		M05000001117		
3. Date of filing/registration in Florida		4. Document number		
526 E	Services, Inc.  Park Avenumassee, FL 32 City,	Name le Address 2301 State and Zip	07 APR -5 AM SECRLIAN OF TALLAHASSEE, F	
Business Filings Incorporated		corporated	8: 45 STATE LORID	
1203	Governors So	Name quare Bivd., Suite 101	NDA 55	
Floric	la street addres	is (P.O. Box NOT acceptable)		
Tallah	assee	FL 32301-2960		
	City, S	State and Zip		

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)

Tom Murphy, Manager

(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 auties, 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) Mark Schiff, AVP, Business Filings Incorporated

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

INHS18(10/99)

FILING FEE: \$25.00

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