Mo600003914

(Requestor's Name)				
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(Business Entity Name)				
(Document Number)				
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T. HAMPTON

APR - 1 2011

EXAMINER

COVER LETTER

Division of Corpor	ations		
SUBJECT:	Reel A	American, LLC	
	Name of Limite	d Liability Compar	ny
Dear Sir or Madam:			
The enclosed Registered A	gent/Registered Office	Change and fee(s)	are submitted for filing.
Please return all correspon	dence concerning this n	natter to the following	ing:
	. Trow, Esquire of Person		
	Dobbins, P.A.		
	E 14th Street		
	L 34470-4641 and Zip Code		,
judy@oc E-mail address: (to be used fo	alalawfirm.com or future annual report notificati	ion)	
For further information co	ncerning this matter, ple	ease call:	
Chester J.			369-8830
Name of Person		Area Code & I	Daytime Telephone Number
STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, Florida	ions er Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a chec	k for the following am	ount:	
\$25 Filing Fee		\$55 Filing Fe	e & Certified Copy

TO: Registration Section

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:	Reel American, LLC
2. (a) Principal office address of limited liability comp	any:
(Note: MUST BE STREET ADDRESS)	100 E. Walton Chicago, IL 60611
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	100 E. Walton Chicago, IL 60611
7/14/06	M06000003914
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:	Corporation Service Company
Registered Office Address:	1201 Hays Street Tallahassee, FL 32301-2525
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:
NEW Registered Agent:	Trow & Dobbins, P.A.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1301 NE 14th Street
	Ocala ,FL 34470
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idliability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	e Florida street address of the registered office
Chester J. Trow Printed or typed name of signee	AT RAT
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I herably confirm that the limited liability comp	d agree to act in this capacity. I further agree to proper and complete performance of my duffes position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.
Signature of Registered Agent/ Division of Corporations, P.O. Box	6327 Tallahassee FL 32314

FILING FEE: \$25.00