M0700005402

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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Visual Frameworks, L	LC ne of Limited Liability Company)	।		
V	, ,			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerni	ng this matter to the following:			
Mark W. Miller				
(Name of Person)				
Visual Frameworks, LLC				
(Firm/Company)		ZE SE	80	
4560 36th Street		AHAS	JUN -	*****
(Address)		SEE, J	ယ် ဝ	
Orlando, Florida 32811-6526		F STA	¥ 5	J
(City/State and Zip Code)		SECRETARY OF STATE TALLAHASSEE, FLORIDA	3	
For further information concerning this m				
Mark W. Miller	at (407) 419-7100			
(Name of Person)	(Area Code & Daytime Telephone Number)	1		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the follow	ving amount:			
	\$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 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: <u>Visual Frameworks, LLC</u>		
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	f limited liability company: 4560 36th Street CET ADDRESS Orlando, Florida 32811-6526	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	4560 36th Street Orlando, Florida 32811-6526	8
September 6, 2007	M0700005402	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of State:	
Registered Agent:	CORPORATION SERVICE COMPANY	
Registered Office Address:	1201 HAYS STREET TALLAHASSEE FL 32301-2525	8
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u>		- NOF 80
NEW Registered Agent:	Mark W. Miller	-3 P
NEW Registered Office Address:	4560 36th Street	
(MUST BE FLORIDA STREET ADDRESS)	Orlando, Florida 32811-6526 CS	Ü.
If the limited liability company is not organized under the that after the change or changes are made, the Florida stre office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company. (Signature of a member or authorized representative of a member)	ستكسم والمسما وناها والماتات وممه والماء والماء	ined ess nited e
Mark W. Miller		
(Printed or typed name of signee)		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p am familiar with and accept the obligations of my position. F.S. Or, if this document is being filed to merely reflect a confirm that the similed liability company has been notification.	agree to act in this capacity. I further agree to proper and complete performance of my duties, as in as registered agent as provided for in Chapter change in the registered office address, I herebyed in writing of this change.	nd I 608, y

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