M08000004157

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(December 1)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

ì

Office Use Only



800186385388

10/12/10--01032--010 **25.00



C. LEWIS

0CT 1 3 2010

EXAMINER

COVER LETTER.

TO: Registration Section Division of Corporations		
SUBJECT:	TOTALLY HOLLYWOOD TV, LLC Name of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/	Registered Office Change and fee(s) are submitted for filing.	
Please return all correspondence	concerning this matter to the following:	
Melinda E		
Totally Hollywo Firm/Compa		
2255 Glades Rd	, Suite 221A	
Boca Raton, City/State and Zi		
Melinda, Earley@F	lollywood.com e annual report notification)	
For further information concern	ng this matter, please call:	
Melinda Earley Name of Person	at (561) 322-3429 Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, Florida 32301	DRESS: MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$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.

and an army with a state of a torium.		
1. Name of the limited liability company:	Totally Hollywood TV, LLC	
2. (a) Principal office address of limited liability compan	y: 2255 Glades Road, Suite 221A	
(Note: MUST BE STREET ADDRESS)	Boca Raton, FL 33431	
(b) Mailing address of limited liability company:		
(Note: MAY BE POST OFFICE BOX)		
9/12/08	M0800000415%	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dent of State:	
Registered Agent:	and the second s	
•	Corporation Service Company	
Registered Office Address:	1201 Hays Street Tallahassee, FL 32301-2525	
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:	
<u>NEW</u> Registered Agent:	Laurie S. Silvers	
NEW Registered Office Address:	2255 Glades Road	
(MUST BE FLORIDA STREET ADDRESS)	Suite 221-A Boca Raton ,FL 33431	
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 of authorized representative of a member		
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 duties, 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		
Division of Cornerations P.O. Roy 63	127 Tallahassee FL 32314	

FILING FEE: \$25.00