

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA00000023

: (850)222-1092

Phone Fax Number

: (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			

LLC REGISTERED AGENT CHANGE WIDE MARKETING SERVICES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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Corporate Filing Menu

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K.SALY EXAMINER JUL 22 2013

COVER LETTER

_	tration Section	
Divis	ion of Corporations	
SUBJECT:	Wide Marketing S	Services, LLC
	Name of Li	lmited Liability Company
Dear Sir or M	fadam:	
The enclosed	Registered Agent/Registered Of	ffice Change and fee(s) are submitted for filing.
Please return	all correspondence concerning the	his matter to the following:
Emily \	/incent	
	Name of Person	
NRAI C	Corporate Services	s, Inc.
	Firm/Company	
2875 N	lichelle Dr., Suite	100
	Address	
Irvine,	CA 92606	
	City/State and Zip Code	
	nt@nrai.com	
E-mail add	ress: (to be used for future annual report no	Affication)
For further in	nformation concerning this matte	r, please call:
Emily \	/incent	at (800) 562-6439
	Name of Person .	Area Code & Daytime Telephone Number
Regis Divis Clifto 2661	EET/COURIER ADDRESS: tration Section ion of Corporations on Building Executive Center Circle hassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Encl	osed is a check for the followin	g amount:
■ \$ 2	5 Filing Fee	S55 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.

1. Name of the limited liability company: Wide Marketing Services, LLC						
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	3519 Palm Harbor Blvd. Palm Harbor, FL 34683	•		
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	3519 Palm Harbor Blvd. Palm Harbor, FL 34583	عر.		
9/	25 <i>/</i> 2	009	M09000003798	4 7		
_			. Document number	ŕ		
5.	(a)	Registered Agent and Registered Office shown on the	ne records of the Florida Dept, of State:			
		Registered Agent:	Paracorp Incorporated			
		Registered Office Address:	236 East 6th Avenue			
		•	Tallahasses, FL 32303			
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> NEW Registered Agent:	National Registered Agents, Inc.			
NEW Registered Office Address:		NEW Registered Office Address:	1200 South Pine Island Road			
		MUST BE FLORIDA STREET ADDRESS)	Plantation ,FL 33324			
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						
		INGLES R. DARST or typed name of signee				
		by accept the appointment as registered agent and as with the provisions of all statutes relative to the provisions of all statutes relative to the provisions of my poser 608, F.S. Or, if this document is being filed to mer s, I hereby confirm that the limited liability company of Registered Agent				
		Division of Corporations, P.O. Box 632 FILING FEE: \$2	7, Tallahassee, FL 32314			

INHS18 (05/08)