

m 10000001821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

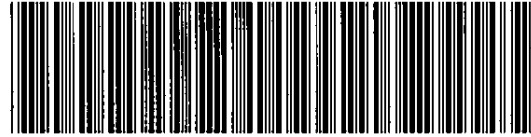
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

A. LUNT
NOV 15 2010
EXAMINER

Office Use Only



500187362105

11/10/10--01010--017 **50.00

FILED
2010 NOV 10 PM 2:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ringleader Agency, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christine Casey

Name of Person

ATMS

Firm/Company

6905 N. Wickham Road, Suite 403

Address

Melbourne, FL 32940

City/State and Zip Code

ccasey@telecomgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christine Casey

Name of Person

at (321)

373-1547

Area Code and Daytime Telephone Number

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 following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
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: Ringleader Agency, LLC

2. (a) Principal office address of limited liability company: 6905 N. Wickham Road, Suite 303



(Note: MUST BE STREET ADDRESS)

Melbourne, FL 32940



(b) Mailing address of limited liability company:

6905 N. Wickham Road, Suite 303

(Note: MAY BE POST OFFICE BOX)

Melbourne, FL 32940

04/21/2010

3. Date of filing/registration in Florida

M10000001821

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Robert Huber

Registered Office Address:

6905 N. Wickham Road, Suite 303
Melbourne, FL 32940

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

National Registered Agents, Inc.

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

2731 Executive Park Drive

Suite 4

Weston, FL 33331

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

Thomas E. Biddix, 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 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

Victor Alfano, Vice President of National Registered Agents, Inc.

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

FILING FEE: \$25.00

FILED

2010 NOV 10 PM 2:41
TALLAHASSEE, FLORIDA
SECRETARY OF STATE