M10000003644

(Requestor's Name)				
(Address)				
(100.000)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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D. BRUCE

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EXAMINER

COVER LETTER

TO: Registration Sect Division of Corp.			
SUBJECT: DOM	nains New Media Name of Limited 1	Com LLC Liability Company	
Dear Sir or Madam:			
The enclosed Registered	Agent/Registered Office Cl	nange and fee(s) are submitted f	or filing.
Please return all correspo	ondence concerning this mat	ter to the following:	
Debi Kni	he of Person		
DomainsNew	Media. com LCC	dba Panamacity	beach-com
1520 Moy	lan Road,		II APR II PM 31: CURETARY OF STA LAHASSEE, FLOO
Panama City/St	Hy Beach, FL ate and Zip Code Me City Beach. I for future annual Jeport notification	32407	PM 41: 38 PM 41: 38 OF STATE E. FLORIDA
E-mail address: I (to be used	me city beach. I for future annual peport notification	Com	
	concerning this matter, pleas		
Debi Kn Name of Per	ight at (8	SD 832-0221 Area Code & Daytime Telephone	Number
STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, Florid	n ations nter Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a ch	eck for the following amou	nt:	
\$25 Filing Fee		\$55 Filing Fee & Certified C	Сору

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:	New Media. Com LLC
2. (a) Principal office address of limited liability company	y: 1520 Moylan Rd
(Note: MUST BE STREET ADDRESS)	Panama City Beach, FL 32407
(b) Mailing address of limited liability company:	7.0. Bex 18065
(Note: MAY BE POST OFFICE BOX)	Panama City Beach, FL 3241
3. Date of filing/registration in Florida	M1000003644 4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Debi Knight
Registered Office Address:	1520 Moylan Rd
	Panama City Beach, FL 32417
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1520 Moylan Rd Panama City Beach, FL 32407
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signed.	lorida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	ngree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in crely reflect a change in the registered office y has been notified in writing of this change.

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

Signature of Registered Agent