## MIROCOCOLO

(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:						

Office Use Only



000219357390

01/27/12--01010--010 \*\*25.00

12 JAN 27 PH 12: 23

B. BOSTICK
JAN 3 0 2012
EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corporations						
SUBJ			olutions LL			· •	_
Dear S	Sir or Madam:					•	
The en	nclosed Registered Agent/Registered	Office (	Change and fee	e(s) are submitt	ed for filin	g.	
Please	return all correspondence concernin	g this m	atter to the foll	owing:			
	Brandon Kozak						
	Name of Person						
	W3Evolutions LLC Firm/Company		<del></del>				
<del></del>	1012 Marlin Lakes Circle # Address	612			SEULLANASS TALLAHASS	12 JAH 27	634 4
	Sarasota, FL 34232 City/State and Zip Code				EE, FLORI	PH I2: 2	*
	brandon@w3evolutions.co	om			>	ယ	
	rther information concerning this ma						
	Brandon Kozak	at (_	216)	5395	309		
	Name of Person		Area Code	e & Daytime Telepl	none Number		
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Registration Division of P.O. Box 63	Corporations			
	Enclosed is a check for the follow	ing amo	ount:				
	\$25 Filing Fee		\$55 Filing	g Fee & Certifi	ed 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:	W3Evolutions LLC						
2. (a) Principal office address of limited liability company	: 1546 Eli	zabeth Lane					
(Note: MUST BE STREET ADDRESS)	Macedonia, OH 4456						
(b) Mailing address of limited liability company:	PO BOX 52881						
(Note: MAY BE POST OFFICE BOX)	Sarasota, FL 34232						
1/18/2011	M1100000	00204					
3. Date of filing/registration in Florida	4. Document number						
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
Registered Agent:							
Registered Office Address:							
<b>č</b>							
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	V Registered Office add	ress:					
NEW Registered Agent:	Brandon Kozak						
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1012 Marlin Lakes Circle #612						
	Sarasota	,FL 34232					
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member  Printed or typed name of signee  I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the provision of all statutes relative to the provision of all statutes relative to the provision of the complex chapter of the provision of the company confirm that the limited liability company	SOUTH TO A TO	27 PH 12: 2					
Signature of Registered Agent							

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