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SECRETARY OF STATES
DIVISION OF CORPORATIONS

T. HAMPTON

MAY - 4 2011

EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations | · | |
|---|---|--|
| Division of Corporations | | |
| SUBJECT: Art Oyster LLC Name of Limited Liability Company | | |
| Name of Limite | d 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 n | natter to the following: | |
| | | |
| Jill Meryl Burgett | | |
| Name of Person | | |
| Art Oyster LLC | | |
| Firm/Company | | |
| | | |
| 9825 Marina Blvd. Suite 100 | | |
| Address | | |
| | | |
| Boca Raton, Florida 33428 | | |
| City/State and Zip Code | | |
| | | |
| paintingwholesalers@gmail.com E-mail address: (to be used for future annual report notification) | | |
| E-mail address: (to be used for future annual report notificati | on) | |
| For further information concerning this matter, ple | rase call: | |
| Jill Meryl Burgett at (_ | 561) 706-6963 | |
| Name of Person | Area Code & Daytime Telephone Number | |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: | |
| Registration Section | Registration Section | |
| Division of Corporations | Division of Corporations | |
| Clifton Building | P.O. Box 6327 | |
| 2661 Executive Center Circle | Tallahassee, Florida 32314 | |
| Tallahassee, Florida 32301 | | |
| Enclosed is a check for the following am | ount: | |
| \$25 Filing Fee | \$55 Filing Fee & Certified Copy | |



RECEIVED

11 MAY -3 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

April 18, 2011

JILL MERYL BURGETT 9825 MARINA BLVD STE 100 BOCA RATON, FL 33428

SUBJECT: ART OYSTER LLC Ref. Number: M11000001415

We have received your document for ART OYSTER LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

What are you changing?

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 211A00009334

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.

| Name of the limited liability company: | Art Oyster LLC |
|--|---|
| 2. (a) Principal office address of limited liability company | 9825 Marina Blvd. Suite 100 |
| (Note: MUST BE STREET ADDRESS) | Boca Raton, Florida 33428 |
| (b) Mailing address of limited liability company: | 9825 Marina Blvd. Suite 100 |
| (Note: MAY BE POST OFFICE BOX) | Boca Raton, Florida 33428 |
| 3/17/2011 | M11000001415 |
| 3. Date of filing/registration in Florida | 4. Document number |
| 5. (a) Registered Agent and Registered Office shown on t | |
| Registered Agent: | Jill Maryl Burgett |
| Registered Office Address: | 1635 NW 7th Place opinesville, Florida 32603 |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> | <u> </u> |
| NEW Registered Agent: | |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | 9825 Marina Blvd., Suite 100 Boxa Raton ,FL 33428 |
| If the limited liability company is not organized under the leanning confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identified 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 | orida street address of the registered office |
| Signature of a greenber or authorized representative of a member | NOT COUNTY TO SEE TARY |
| Jill Meryl Burgett Printed or typed name of signee | A XC |
| I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provision and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company | gree to act in this capacity. I further agree to per and complete performance of my futies in the registered agent as provided for including the perfect a change in the registered office has been notified in writing of this change. |
| Signature of Registered Agent Managing Thanker, A | toyste. |
| D' | 97 T-H-L EI 22214 |