## 

questor's Name)	
dress)	
dress)	
//State/Zip/Phone	e #)
WAIT	MAIL
sin <b>es</b> s Entity Nar	me)
cument Number)	
Certificates	s of Status
Filing Officer:	
	1
	dress)  dress)  dress)  dress)  dress)  dress  dress  dress  WAIT  siness Entity Nar  cument Number)  Certificates

Office Use Only



600237807806

DEPEREDENT OF STATE



AUG 2 4 2012

**EXAMINER** 



CORPORATION SERVICE COMPANY ACCOUNT NO. : I2000000195

REFERENCE :

AUTHORIZATION :

COST LIMIT :

ORDER DATE: August 17, 2012

ORDER TIME : 10:29 AM

ORDER NO. : 316929-008

CUSTOMER NO: 7539619

## CHANGE OF AGENT

NAME: PURETALK HOLDINGS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS:

## 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: PURETALK	HOLDINGS, LLC
2. (a) Principal office address of limited liability compar ( <i>Note: MUST BE STREET ADDRESS</i> )	ny: 4113 Monticello Street Covington GA 30014
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
05/06/2011	M11000002292
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept. of State:
Registered Agent:	Corporate Creations Network, Inc. 3. 3. 3. 3.
Registered Office Address:	Palm Beach Gardens FL 33410
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  NEW Registered Agent:  Corporation Service Company	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street
	Tallahassee ,FL 32301
If the limited liability company is not organized under the that after the change or changes are made, the Florida stre office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.  (Signature of a member)	cet address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited
(Printed or typed name of signee)	_
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the part am familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notificed.	agree to act in this capacity. I further agree to roper and complete performance of my duties, and I n as registered agent as provided for in Chapter 608, I change in the registered office address, I hereby ed in writing of this change

By: (Signature of Segistered Agent) Corporation Service Company Sylvia Queppet, Asst VP

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

FILING FEE: \$25.00