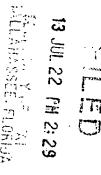
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LIBREC13 LLC

Name of Limited 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 matter to the following:

Christopher B. Cottingame

Name of Person

LIBREC13 LLC

Firm/Company

880 Mandalay Avenue, APTC708

Address

Clearwater Beach, FL 33767

City/State and Zip Code

ccottingame@yahoo.com

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

For further information concerning this matter, please call:

Christopher B. Cottingame at (727) 7292877

Name of Person

Area Code & 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

□ \$55 Filing Fee & 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.	Naı	ne of the limited liability company: LIBREC13 LLC			<u> </u>	_	
2.	(a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)		BOX 2869				
			JACKSON, WY 83001				
(b)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	880 Mandalay Avenue ZAANLE GF				
		(Note: MAY BE POST OFFICE BOX)	APT C708	/_	MATCHIN	IC VOOR	
			Clearwater Beach, FL 33767				
18	Janua	ry 2013	M13000000420				
3.	Dat	e of filing/registration in Florida	4. Document number		· · · · ·		
5.	(a)	Registered Agent and Registered Office shown on the Registered Agent:	he records of the Florida I	Dept. o	f State:		
		Registered Office Address:	1037 GREYSTONE LANE	*			
		Registered Office Address.	SARASOTA, FL 34232		- ZŠ		
				3 - 7			
				313			
	(b)	Enter name of NEW Registered Agent and/or NEW	V Registered Office addr	<u>ess</u> :	22	O Named	
		NEW Registered Agent:		F*1.	<u> </u>	117	
		**************************************		<u>.</u>	N		
		NEW Registered Office Address:		<u> </u>			
(MUST BE FLORIDA STREET ADDRESS)		MUST DE FLUKIDA STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	ξ <u>.</u> .F	<u> </u>		
				,г	L		
an lia th th	nfind the lability of the lability of the lability of the labelity of the labe	imited liability company is not organized under the laned that after the change or changes are made, the Flee business office of the registered agent will be identify dompany, it is hereby confirmed that the change(s) unders of the limited liability company or as otherwise evaluating agreement of the limited liability company.	orida street address of the cal. Or, in the case of a F was/were authorized by a	registe lorida l n affiri	red offi limited native v	ote of	
Рг	inted	histopher B. Ottingame or typed name of signee	-				
I co an Cl aa	here mply d I d japte lares	by accept the appointment as relative agent and as with the provisions of all statutes relative to the proviming the provisions of all statutes relative to the provim familiar with and accept the obligations of my poster 608, F.S. Or, if this document is being filed to ments, I hereby confirm that the limited liability company	gree to act in this capacity per and complete perform ition as registered agent o ely reflect a change in the has been notified in writi	I fur lance of as prove regist ng of t	ther ag of my di vided fo ered of his chai	ree to ities, r in fice ige.	

Signature of Registered Agent