## Po20000 55062

From: MARIA MILLS 11319 ANDREA DR JACKSONVILLE, FL 32218	40
(City/State/Zip/Phone #)	
(Business Entity Name)  (Document Number)  Certified CopiesCertificates of Status	O
Special Instructions to Filing Officer:	

Office Use Only



05/18/04--01056--010 \*\*35.00

OL MAY 18 PM 3: 11
SECRETARY OF SIAIE
TALLAHASSEE, FLORIO

RACA9 CROLU

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502, 607.15			
to change its regi	ted for a corporation organized under the laws of istered office or registered agent, or both, in the S	state of Florida	in order	
	ne corporation: Click Away In	=		
2. The principal of	office address: 8008 LEM TURNE	on RD.		
	TACKSONVILLY, 17	1. 32208		
3. The mailing ad				
	JACKSMUTTE, 3	7] 32224		
4. Date of incorpo	Idress (if different): $90.899735$ $7ACKSMVIIE$ , $3$ oration/qualification: $5/16/2002$ Do	cument number: Po2 0000 5	5062	
	street address of the current registered agent and			
	CARINA DENNEY		<del>.</del>	
	9168 JAZKSON AVE			
	Miksonlinke, A 32208		700 P	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	MARIA C. MILLS.		M & 8	
-	MARÍA C. MILLS.  11314 ANDREA DR.  (P.O. Box or personal mailbox NOT		_ES & O	
	(P.O. Box or personal mailbox NOT	Cacceptable)	<u> </u>	
-	JACKSONVILLE, 72-3	12218	_ P	
The street addres changed will be i	s of its registered office and the street address cidentical.	of the business office of its regis	stered agent, as	
Such change was the board, or the	authorized by resolution duly adopted by its be corporation has been notified in writing of the	oard of directors or by an office change.	er so authorized by	
4 Naria	grature of an officer or director)	Maria Mills (Printed or typed name an	OWNCV	
I hereby accept to I further agree to duties, and I am being filed merel been notified in v	he appointment as registered agent and agree to be comply with the provisions of all statutes related familiar with and accept the obligation of my play to reflect a change in the registered office add writing of this change.			
Marie	k LLCCS Signature of Registered Agent)	5-13-04	4	
If signing on beh		(Date)	-	
Maria	ALITE	5-13-04		
1 0001 144	(Typed or Printed Name)	(Capacity)	<del></del>	