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COVER LETTER

INHS18 (2/14)

TO: Registration Section Division of Corporations				
SUBJECT: Panicle USA, LLC				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.			
Please return all correspondence concerning this matt	ter to the following:			
Bill Havre				
Name of Person				
Registered Agents, Inc.				
Firm/Company				
7901 4th St. N., Ste. 300				
Address				
St. Petersburg, FL 33702				
City/State and Zip Code				
St. Petersburg, FL 33702				
E-mail address: (to be used for future annual rep	port notification)			
For further information concerning this matter, please	e call:			
George Goddard at (754 , 260-5144			
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 amou	int:			
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FO LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compasubmits the following statement in order to change its registered office or registered agent, or both, in the State Florida.

	ime of the limited liability company:		
(a)	2733 SW 83rd Ave.	(b) 2733 SW 83rd Ave.	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Miramar, FL 33025	<u>N</u>	liramar, FL 33025
	05/16/2018		8000122676
	Date of filing/registration in Florida		Document number
(a)	GODDARD, GEORGE D		
(a)	Registered Agent and Registered Office shown on the records of	f the Florida Dep	ot, of State:
	2733 SW 83rd Ave.		
	Registered Office Address (MUST BE FLORIDA STREET	(ADDRESS)	
			20
	Miramar	L 33025	
	, F	L <u>00020</u>	 .
(b)	Registered Agents Inc.		· · · · · · · · · · · · · · · · · · ·
(0)	Enter name of NEW Registered Agent and/or NEW Registered	d Office addres	<u> </u>
	7901 4th St N	_	بن ښ
	NEW Registered Office Address:		
	STE 300		
	St. Petersburg	_L 33702	
ie cha gent v as/we	imited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cless of organization or the operating agreement of the	of the register liability comp of the limited	ed office and the business office of the regist any, it is hereby confirmed that the change(s I liability company or as otherwise provided
	ture of a member or authorized representative of a member	GEOR	GE GODDARD
Cima	ture of a member or authorized representative of a member		Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and acceptate obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being file to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Bill Havre - Assistant Secretary

Signature of Registered Agent