OVE DRIVE L 34949 US			
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.			
GARY A SOFEN			01/10/2017
Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :			
MGR	Title	MGR	
SOFEN, GARY A	Name	SOFTEN, GARY A	
	A 34949 US antity submits this statement for the purpose of changing its registred GARY A SOFEN Electronic Signature of Registered Agent erson(s) Detail : MGR	A 34949 US ntity submits this statement for the purpose of changing its registered office or regist GARY A SOFEN Electronic Signature of Registered Agent erson(s) Detail : MGR Title	A 34949 US ntity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flow GARY A SOFEN Electronic Signature of Registered Agent erson(s) Detail : MGR Title MGR

Address

City-State-Zip:

1816 WILDCAT COVE FORT PIERCE, FL 34949

#### **Current Mailing Address:**

**1816 WILDCAT COVE DRIVE** FORT PIERCE, FL 34949 US

#### FEI Number: 37-1785054

#### Name and Address of Current Registered Agent:

1816 WILDCAT COVE

City-State-Zip: FORT PIERCE FL 34949

Address

#### I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GARY A SOFEN

MM

01/10/2017

Electronic Signature of Signing Authorized Person(s) Detail

### FILED Jan 10, 2017 Secretary of State CC4391264348

Certificate of Status Desired: No

1816 WILDCAT COVE DRIVE

FORT PIERCE FL 34949

Date

## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L15000095076 Entity Name: H&G VENTURES LLC

# **Current Principal Place of Business:**