	PORTER, BRUCE C 5408 SW 16TH PLACE CAPE CORAL, FL 33914 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.						
	SIGNATURE:	BRUCE PORTER			01/28/2013	
		Electronic Signature of Registered Agent			Date	
	Authorized Person(s) Detail :					
	Title M	MGR	Title	MGR		
	Name F	PORTER, BRUCE	Name	PORTER, PAMELA		
	Address 8	8625 EAST HORTON ROAD	Address	8625 EAST HORTON ROAD		

8625 EAST HORTON ROAD BLISSFIELD, MI 49228

DOCUMENT# M1100006068

Entity Name: TROPICAL HURRICANE, LLC

**Current Principal Place of Business:** 

## **Current Mailing Address:**

8625 EAST HORTON ROAD BLISSFIELD, MI 49228

## FEI Number: 45-3943543

## Name and Address of Current Registered Agent:

PORTER, BRUCE C 5408 \$ CAPE

City-State-Zip: BLISSFIELD MI 49228

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 608, Florida Statutes; and
that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRUCE PORTER

**OWNER/MANAGER** 

City-State-Zip: BLISSFIELD MI 49228

01/28/2013

Electronic Signature of Signing Authorized Person(s) Detail

## **FILED** Jan 28, 2013 Secretary of State CC7583604995

Certificate of Status Desired: Yes

Date