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COVER LETTER

TO:	CO: Registration Section Division of Corporations					
	•					
SUBJECT: Hooker Holdings LLLP Name of Limited Partnership or Limited Liability Limited Partnership						
	enclosed Statement of Change of Ro are submitted for filing.	egistered Office and/o	r Registered Agent and			
Please	e return all correspondence concern	ning this matter to:				
	Douglas P Hooker					
	Contact Person					
	Hooker Holdings LLL	_P				
	Firm/Company					
	5511 Hansel Ave					
	Address					
•	Orlando, FL 32809	I				
	City, State and Zip Code					
	dhregional@aol.	com				
E	-mail address: (to be used for future annua					
For fu	urther information concerning this r	matter, please call:				
	Douglas P Hooker	at (407)	851-1519			
	Name of Contact Person	Area Code and I	Daytime Telephone Number			
Enclo	sed is a \$35.00 check made payable	e to the Florida Depar	tment of State.			
STREET ADDRESS:		MAILIN	MAILING ADDRESS:			
Registration Section		Registrati	Registration Section			
	ion of Corporations		Division of Corporations			
	n Building	P. O. Box				
	Executive Center Circle	Tallahass	ee, FL 32314			
Tallah	nassee, FL 32301					

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1	Hooker Holdings LLLP						
	Name of Limited Partnership or Lim	ited Liability L	imited Partnership)			
2.	06/22/2011	3.	A110000	00461			
Date	Date of filing/registration in Florida		Florida documen	da document number			
4. The name Department o	of the registered agent and the registered of State:	office address a	is shown on the rec	cords of the Florida			
	Douglas PTer	nant Hookei	r				
	Name						
	5511 Hansel Ave						
Address							
	Orlando, FL 32809						
	City, State	and Zip					
5. The name	and Florida street address of the new regis	stered agent and	d/or office:				
	Amy D Be	eaulieu					
	Nam						
	5511 Han						
	Florida street address (P.O	D. Box not acce	eptable)				
	Orlando	FL	32809_	五路 🕇			
	City, State	and Zip		ES E			
_Dn	ge(s) is/are effective when filed by the Flo	rida Departme	nt of State.	MAY -1 PM 1: 30 LAHASSEE, FLORE further again			
_	_	,		STA :			
comply with the	ot the appointment as registered agent and he provisions of all statutes relative to the	d agree to act ii proper and co	n this capacity. I f mplete performanc	urther agreets			
and I din fami	liar with an accept the obligations of my p	oosition as regi	stered agent.				
Signature of H	egistered Agent						

\$35.00

Filing Fee:

Certified Copy (optional): \$52.50