

**B1300000097**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

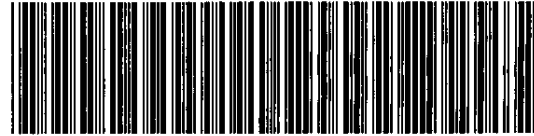
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Thirsty Duck, LP  
Name of Limited Partnership or Limited Liability Limited Partnership

**DOCUMENT NUMBER:** B1300000097

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Ralph Bruce  
Contact Person  
Thirsty Duck, LP  
Firm Company  
2160 Duck Slough Blvd., Suite 102  
Address  
Trinity, FL 34655  
City, State and Zip Code  
rbruce@thirsty-duck.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ralph Bruce at ( 727 ) 376-2400  
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

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**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. Thirsty Duck, LP  
Name of Limited Partnership or Limited Liability Limited Partnership

2. 1/10/17 3. B1300000097  
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Alex R. Deeb  
Name

9400 River Crossing Blvd., Suite 102  
Address

New Port Richey, FL 34655  
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Gregory M. Landegger  
Name

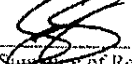
2160 Duck Slough Blvd., Suite 102  
Florida street address (P.O. Box not acceptable)

Trinity FL 34655  
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

  
Signature of General Partner

*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 accept the obligations of my position as registered agent.*

  
Signature of Registered Agent

Filing Fee: \$35.00  
Certified Copy (optional): \$52.50

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