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Requirer's hand Of Address	ノン/0ン 1000033733816 -08/25/0001068004
City/State/Zip Phone #	******25.00 ******25.00
	Office Hee Only

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CORPORATION NAME(S)	& DOCUMENT NUMBER(S),	, (if known):
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1.		
(Corporation Name)	(Document #)	
2. (Corporation Name)	(Document #)	GO AUG 2 SECRETA
3. (Corporation Name)	(Document #)	25 PH 5: ARY OF STA
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☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Photocopy	☐ Certified Copy ☐ Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>	
☐ Profit ☐ Not for Profit ☐ Limited Liability ☐ Domestication ☐ Other	Amendment Resignation of R.A Change of Register Dissolution/Withda Merger	1 1 1 1 1 2 2 1 1 7 2
OTHER FILINGS	REGISTRATION/QU	JALIFICATION
☐ Annual Report ☐ Fictitious Name	Foreign Limited Partnershi Reinstatement Trademark Other	p C

Examiner's Initials

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

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: Precision Acquisition I, LLC
2. The mailing address of the limited liability company is:
6506 Spyglass Lane Bradenton FL 34202
May 16, 2000 L0000005783
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Cheryl Lynn Davis Name
6506 Spyglass Lane
Bradenton FL 34202 F.S. 3
6. The name and address of the new registered agent and/or office:
City, State and Zip 6. The name and address of the new registered agent and/or office: Coldsmith and Crout, P.A. Name 2180 Park Avenue North, Suite 10881 Florida street address (P.O. Box NOT acceptable) Winter Park, FL 32789 City, State and Zip
Winter Park, FL 32789 City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature 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 accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed 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.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

(Signature of Registered Agent)