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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ARASEL HOLDINGS, LUC	
(Name of Limited Liability Company)	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
STEFANIE BLACK LEWIS (Name of Person)	71
Black LEWIS LAW PL (Firm/Company) (Firm/Company)	· ·
44 WEST FLAGLER ST. SUTTE 675	
MIAMI, FL 33130	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
S. GOODFREND at (706) 271-7739	
(Name of Person) (Area Code & Daytime Telephone Number)	
	٠
STREET/COURIER ADDRESS: MAILING ADDRESS:	
Registration Section Registration Section	
Division of Corporations Division of Corporations Division of Corporations	
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314	

☐ \$55 Filing Fee & Certified Copy

Tallahassee, Florida 32301

\$25 Filing Fee

Enclosed is a check for the following amount:

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

Pursuant to the provisions of sections 60% liability company submits the following stagent, or both, in the State of Florida.	8.416 or 608.508, Florida Statutes, the undersigned limited stement in order to change its registered office or registered	
1. The name of the limited liability compan	y is: HRASEL HOLDINGS, LLC	
2. The mailing address of the limited liabili	ty company is: 44 WEST FLAGLER.	
MIAMI, FL. 331	30	
12/15/2000	L0000015617	
3. Date of filing/registration in Florida	4. Document number	
5: The name of the registered agent and the Florida Department of State:	registered office address as shown on the records of the	
373	Name Name Name Address	
FT. LA	City, State and Zip 33514132-0	
6. The name and address of the new register	ed agent and/or office:	
STEFF 44 WEST	PLAGER-SUITE 675	
	dress (P.O. Box NOT acceptable) FL 33/30 ty, 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 n		
STVART GOODFREE (Printed or typed name of signee)		
I hereby accept the appointment as register comply with the provisions of all statutes reland I am familiar with and accept the obligation of the control of	ed agent and agree to act in this capacity. I further agree to ative to the proper and complete performance of my duties, itions of my position as registered agent as provided for in ing filed to merely reflect a change in the registered office bility company has been notified in writing of this change.	
(Signature of Rogistared Agent)		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00 44 West Flagler Street Suite 675 • Miami, FL 33130 • Tel. 786.888.6030 • Fax. 786.787.1745 • info@blacklewislaw.com

April 30, 2007

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Arasel Holdings, LLC - Doc # L00000015617

Change of Registered Agent

Dear Sir or Madam,

Enclosed please find a check in the amount of \$25.00 along with a copy of the Registered Agent change request. The original Registered Agent change was inadvertently sent to you last week without the check.

Sincerely,

Stefanie Black/Lewis

Enclosures

是特別的自然 15.17年的主席

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