L040000/2105

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C. LEWIS

JUN 5 2009

EXAMINER

* COVER LETTER *

Division of Corporations		
SUBJECT: Boslick (Name of Limited L	ighility Company)	
(Name of Emined E	nationally Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.	
Please return all correspondente concerning this matter t	to the following:	
Philip Trayer (Name of Person)		
(Name of Person)		
(Firm/Company)		
6812 Pinehunst Place		
(Address)		
Bradenton, PL 34202		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Philip Trans	1 777 - 16.11	
Philip Troyer at (941) (Name of Person) (Area	a Code & Daytime Telephone Number)	
	IAILING ADDRESS:	
	egistration Section ivision of Corporations	
Clifton Building P.	O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	allahassee, Florida 32314	
Enclosed is a check for the following amount:		
☑ \$25 Filing Fee □ \$	\$55 Filing Fee & Certified Copy	

INHS18 (5/08)

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. Name of the limited liability company:	slick LLC
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	: 6812 Pinehurst Place Bradenton, FL 34202
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Same
2-13-2004	L04000012105
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	John Compton
Registered Office Address:	1819 Main Street
	Sarasota FL
•	34236
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEY</u>	V Registered Office address:
NEW Registered Agent:	Philip D. Troyer
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Bradenton, FL 34202
If the limited liability company is not organized under the lithat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cahereby confirmed that the change(s) was/were authorized b liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	address of the registered office and the business use of a Florida limited liability company, it is an affirmative vote of the members of the limited
Philip D. Troyer	
(Printed or typed name of signee)	•
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proam familiar with and accept the obligations of my position of F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified	· • • • • • • • • • • • • • • • • • • •
(Signature of Registered Agent)	ECRI ECRI
Division of Corporations, P.O. Box FILING FEE:	6327, Tallahassee, FL 32314
INHS18 (05/08)	F ST