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06 SEP -5 PM 1: 25 SECRETARY OF STATE

COVER LETTER.

TO:	Registration Section Division of Corporations						
SUBJ	ECT:	Hospin	(Name	of Limited L	iability Company)	e LLC	_
Dear S	Sir or Mad	am:					
The e	nclosed Re	egistered Agent	/Registere	ed Office Ch	ange and fee(s) are	submitted for f	iling.
Please	e return all	correspondence	e concern	ing this matt	er to the following	; ;	
	Soyce	(Name of P	ier				
<u>H</u>		(Name of P	erson) مد	Des Street	<u>L</u> c	-	
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N		_	So were		32168		
For fu	uther infor	mation concern	ning this n	natter, please	call:		
	1gru	Name of Person	1)	at (_ 3 '		N736 Daytime Telep	 hone Number)
	Registrati Division of Clifton Bo 2661 Exe	COURIER AI on Section of Corporations uilding cutive Center Ci ee, Florida 3230	rcle		MAILING ADDR Registration Section Division of Corpor P.O. Box 6327 Tallahassee, Florid	on rations	
	Enclosed	l is a check fo	r the follo	wing amour	nt:		
	\$25 F	iling Fee		Ē] \$55 Filing Fee &	& Certified Copy	r

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.

2. The mailing address	nited liability company is:	
WENT SUMS	wa Redch, FL, 521C8	
4/3/4	L040000	67162
3. Date of filing/regist	ration in Florida 4. Document number	r
5. The name of the reg Florida Department	istered agent and the registered office address as shown on of State:	the records of the
	John Miller	
	Noha Miller Name No Oiyee	
	New Southern FL 32168	
	City, State and Zip	SE SE
6. The name and addre	ss of the new registered agent and/or office:	도움 %
	Joyce Minion	FILED P-5 PM STARY OF HASSEE,
	Joyce Minico 1157 N Dine Fuly	
	Florida street address (P.O. Box NOT acceptable)	I: 25
	Now Snylma FL 32168	©⊞ W
	LOG NUMBER 15 25100	

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)

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.

(Signature of Registered Agent)