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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to Filing Officer: | | |
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SECRETARY OF STATE

C. LEWIS
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EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations | · | |
|--|--|--|
| SUBJECT: Maxxus Holdings, LLC (Name | e 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 concernin | g this matter to the following: | |
| Kenneth A. Carsto | | |
| (Name of Person) | | |
| Maxxus Holdings, LLC (Firm/Company) | | |
| 1357 Auburn Lakes Drive | | |
| (Address) | | |
| Rockledge, Florida 32955-6744 | | |
| (City/State and Zip Code) | | |
| For further information concerning this ma | tter, please call: | |
| Kenneth A. Carsto | at (321) 208-8544 | |
| (Name of Person) | (Area Code & Daytime Telephone Number) | |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: | |
| Registration Section | Registration Section Division of Corporations | |
| Division of Corporations Clifton Building | Division of Corporations P.O. Box 6327 | |
| 2661 Executive Center Circle Tallahassee, Florida 32301 | Tallahassee, Florida 32314 | |
| Enclosed is a check for the follow | ing amount: | |
| 2 \$25 Filing Fee | \$55 Filing Fee & Certified Copy | |

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.

| Name of the limited liability company: Maxxus F | loldings, LLC | |
|---|---|--|
| 2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS) | any: 1357 Aubum Lakes Drive Rockledge, Florida 32955-6744 | |
| (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | 1357 Aubum Lakes Drive Rockledge, Florida 32955-6744 | |
| January 10, 2005 3. Date of filing/registration in Florida | <u>L050000006103</u> 4. Document number | |
| 5. (a) Registered Agent and Registered Office shown | on the records of the Florida Dept. of State: | |
| Registered Agent: | Kenneth a. Carsto | |
| Registered Office Address: | 5601 Collins Ave. #1510 Miami Beach, Florida 33140 | |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> | NEW Registered Office address: | |
| NEW Registered Agent: | | |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | 1357 Auburn Lakes Drive | |
| | Rockledge,FL 32955-6744 | |
| If the limited liability company is not organized under that after the change or changes are made, the Florida st office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the article limited liability company. | reet address of the registered office and the business e case of a Florida limited liability company, it is d by an affirmative vote of the members of the limited | |
| (Signature of a member or authorized representative of a member) | ······· | |
| KENNETH A. CACSTO MANAGING ME (Printed or typed name of signee) | SHEOK | |
| I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my positiff. S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been noti | proper and complete performance of my duties, and longs registered agent as provided for in Chapter 608, a change in the registered office address, I hereby field in writing of this change. | |
| (Signature of Registered Agent) | AR 5 T | |
| Division of Corporations, P.O. B FILING F | ox 6327, Tallahassee, FL 32314 | |
| INHS18 (05/08) | | |