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(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
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COVER LETTER

TO:

INHS18 (2/14)

	Registration Section Division of Corporations						
SUBJEC	Florida Forest Products LLC T:						
	Name of Limited Liability Company						
Dear Sir	or Madam:						
The encl	osed Registered Agent/Registered Of	fice Change and f	ee(s) are submitted for filing.				
Please re	eturn all correspondence concerning th	nis matter to the fo	ollowing:				
Richard	Cashman						
	Name of Person						
Florida F	Forest Products LLC						
	Firm/Company		_				
700 Beau	ch Drive NE Apt 803						
	Address		_				
St Peters	burg. FL 33701						
	City/State and Zip Code		_				
cashman	.rick@gmail.com						
E-1	mail address: (to be used for future and	nual report notific	cation)				
For furth	ner information concerning this matter	, please call:					
Richard	Cashman	727 at (501-2770				
	Name of Person		Area Code & Daytime Telephone Number				
:	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the following	g amount:					
■ \$25 Filing Fee		□ \$5:	5 Filing Fee & Certified Copy				

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

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compar submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida

I. N	ame of the limited liability company: Florida Forest	t Products LI	.c		
2. (a)		C.	b)		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(<u>,</u>	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	700 Beach Drive NE Apt 803		700 Beach	Drive NE Apt 803	
	St Petersburg, FL 33701		St Petersbu	rg. FL 33701	
	03/31/2005		L050000320	41	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)					
J. (a)	Registered Agent and Registered Office shown on the record	s of the Florid	a Dept, of State	<u>:</u>	
Richard Cashman Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	Largo				
	isa go	, FL			
/1. \				ي.	
(b)	Enter name of NEW Registered Agent and/or NEW Register	3			
		_ 			
	Richard Cashman		0		
	NEW Registered Office Address: 700 Beach Drive NE Apt 803				
				22.2	
	St Petersburg	, FL		一片は一	
change agent was/w	limited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the membe	c laws of the the register d liability co ers of the lin	ed office and ompany, it is nited liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
the art	icles of organization or the operating agreement of		•	• •	
Ci	ture of a member or authorized representative of a member	Ric	hard Cashman	<u> </u>	
•	•			Printed or typed name of signee	
I nere provis the ob- to mer notifie	by accept the appointment as registered agent and ions of all statutes relative to the proper and compligations of my position as registered agent as provely reflect a change in the registered office address d in writing of this change.	agree to act eie perform ided for in (. I hereby c	t in this capa ance of my d Chapter 605, onfirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed be limited liability company has been	
Signatu	are of Registered Agent				