L-05000117-948

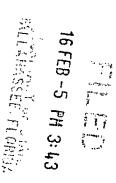
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
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COVER LETTER

TO: Registration Section Division of Corporations						
Pachyderm Partners I	II, LLC					
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.					
Please return all correspondence concerning th	nis matter to the following:					
NICOLAS SIHA						
Name of Person						
LEGALINC CORPORATE SERVICES	INC.					
Firm/Company						
17350 STATE HIGHWAY 249	·					
Address						
HOUSTON, TX 77064						
City/State and Zip Code						
SUPPORT@LEGALINC.COM						
E-mail address: (to be used for future an	nual report notification)					
For further information concerning this matter	r, please call:					
NICOLAS SIHA	713 478.1040					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount:						
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy					

INHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Nai	me of the limited liability company:	m Par	tners II, LL	.C	
2. (51 CAPTAIN DUNBAR ROAD	(b)		AIN DUNBAR ROAD	
\	· · ·/ -	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) BOX 2408	_	M	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 8	
		BREWSTER, MA 02631	- -	BREWST	TER, MA 02631	
		12/12/2005		L0500011	7948	
3.	<i>(</i> ->	Date of filing/registration in Florida USA-RA LLC	4.]	Document number	
5. ((a)	Registered Agent and Registered Office shown on the records of the 841 PRUDENTIAL DRIVE	e Florida	Dept. of State:		
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 12TH FLOOR			<u> </u>	
		JACKSONVILLE 3	32207	,		
	(b)	LEGALINC CORPORATE SERVICES INC.			्रा १५१ म	
(0)	(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				
		5237 SUMMERLIN COMMONS			ල්දී ය. දිරි ම්ලිද් ය	
		NEW Registered Office Address: SUITE 400			••	
		FORT MYERS, FL	33907			
the age was the	cha ent w s/we arti	mited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liability and the company of the authorized by an affirmative vote of the members of cles of organization or the operating agreement of the litture of a member or authorized representative of a member	he regist bility continuity the limited limite	stered office impany, it is ited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.	
pro the to i not	ovisi obli nere ified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	e to act perform for in C ereby co	in thìs capa ance of my a Thapter 605, onfirm that t	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	