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Change of RA **COVER LETTER**

206-31864

TO:	Registration Section
	Division of Corporation

SUBJECT: Bushin Enterprises, LLC
(Name 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 concerning this matter to the following:

Jason L. Busbin
(Name of Person)

Bisbin Enterprises, UC.
(Firm/Company)

9700 Baughman Lane
(Address)

North Fort Myers FL 33917
(City/State and Zin Code)

For further information concerning this matter, please call:

Tason Busbin at (339) 235-5422 (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 \$\text{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.

agent, or both, in the state of Frontia.	
1. The name of the limited liability company is: Bushin Ento.	rprises, LLC
2. The mailing address of the limited liability company is :9700 Bax	ghman Lane
Worth Fort Myers, FL 33917	
1 1	0031864
3. Date of filing/registration in Florida 4. Document	number
5. The name of the registered agent and the registered office address as show Florida Department of State: Tason L Bushin Name 9700 Baughman Lane Address North Fort Myors FL 33917 City, State and Zip 6. The name and address of the new registered agent and/or office: Name 9700 Baughman Lane Florida street address (P.O. Box NOT acceptable) North Fort Myors FL 3391 City, State and Zip	OG DEC 1-1 AM IO: 43 SECRETARY OF STATE TALLAHASSEE, FLORIDA
If the limited liability company is not examined under the laws of the State.	of Florida it is hereby

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.

(Printed or typed name of signee)

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)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00