LD6 0000 40797

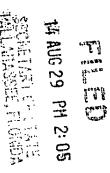
(Re	equestor's Name)					
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PICK-UP	☐ WAIT	MAIL				
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Certified Copies	Certificates of Status					
Special Instructions to Filing Officer:						
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Office Úse Only



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SEP 0 9 2014

C. CARROTHL,

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.

I. Na	ume of the limited liability company: LITTLE HA						
2. (a)	Principal office address of limited liability company:	(b		Mailing address	of limited liab	ility co	mpany:
	(Note: MUST BE STREET ADDRESS)			(Note: MAY			
	688 BREWERS BRIDGE ROAD, #2		688 BRE	EWERS BE	RIDGE RO	AD,	#2
	JACKSON, NJ 08527	JACKSON, NJ 08527					
	04/19/2006		L0600004	10797			
3.	Date of filing/registration in Florida	4.		Document n	umber		
: (a)							
i. (a)	Registered Agent and Registered Office shown on the records of	of the Florida	Dept. of State	· 2:			
	CORPDIRECT AGENTS, INC.		•				
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRESS	2	-			
	1200 SOUTH PINE ISLAND ROAD		-				
		22204		-			
	PLANTATION , F	_{L_} 33324		_			
	Enter name of NEW Registered Agent and/or NEW Registered SG REGISTERED AGENT LLC NEW Registered Office Address: 700 S. FEDERAL HIGHWAY, SUITE 200	ed Office ad	uress:	-	THE REAL PROPERTY OF THE PARTY	14. AUG 29	AL-PARKS SCHOOL STATES
		***		-		PH	المساع
	BOCA RATON, F	_L 3343	2	_	he my me	2: 05	
the cha agent v was/w	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the regi- liability co s of the lim	stered office ompany, it is sited liability	e and the bus s hereby con y company o	iness office firmed that	med the of the the ch	at after registere ange(s)
	Benno			ELI BLE	EMAN		
Signa	nture of a member or authorized representative of a member			Printed or typ	ed name of sig	gnee	
provis the ob to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provide the properties of the segistered office address, d in writing of this change.	gree to acte te perform ded for in (I hereby c	t in this cap ance of my Chapter 605 onfirm that	acity. I furth duties, and I 5, F.S. Or, if the limited li	ner agree to am familia this docum iability com	comp r with ent is pany l	ly with the and accep being filed as been
	4						
Signati	ire of Registered Agent						