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HelpJ. BRYAN

MAY - 7 2010

05/06/2010

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

Pursuant to the provisions of sections 608.416 or 608 liability company submits the following statement in or agent, or both, in the State of Florida.	3.508, Florida Statutes, the undersigned limited der to change its registered office or registere	d d
Name of the limited liability company:	Hoover, LLC	_
2. (a) Principal office address of limited liability compa	nny:	_
(Note: MUST BE STREET ADDRESS)	8275 113th Street North Seminole, FL 33772	-
(b) Mailing address of limited liability company:		_
(Note: MAY BE POST OFFICE BOX)	8275 113th Street North Seminole, FL 33772	-
9/11/06	L06000088908	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:	
Registered Agent:	J. Eric Taylor	.
Registered Office Address:	8275 113th Street North	\
	Seminole, FL 33772	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u> <u>NEW</u> Registered Agent:	EW Registered Office address: TK Registered Agent, Inc.	د ص
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	101 E. Kennedy Boulevard Suite 2700 TampaFL33602	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Gerald Shotts, Manager Printed or typed name of signee	Florida street address of the registered office ntical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote erwise provided in the articles of organization ny.	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familitr with and accept the obligations of my p Chapter 608/FS. On if this document is being filed to maddress, I harepycentifm that the limited liability company. Signature of Registered Agent		
Division of Corporations, P.O. Box 6	327, Tallahassee, FL 32314	

FILING FEE: \$25.00

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