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SECRETARY OF STATE

T. HAMPTON

SEP 11 2008

EXAMINER

COVER LETTER

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Division of Corporations SUBJECT: HORSTMAN FAMILY 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: James Horstman (Name of Person) HORSTMAN FAMILY LLC (Firm/Company) 9311 E. Moccasin Slough Rd (Address) Inverness, FL 34450 (City/State and Zip Code) For further information concerning this matter, please call: James Horstman (Name of Person) (Area Code & Daytime Telephone Number) STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section **Registration Section Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: **☑** \$25 Filing Fee □ \$55 Filing Fee & Certified Copy

TO:

Registration Section

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.

I. Na	ame of the limited liability company: HORSTMA	N FAMILY LLC	
2. (a)	Principal office address of limited liability company: 9311 E. Moccasin Slough Rd (Note: MUST BE STREET ADDRESS)		
	V 10 10 10 10 10 10 10 10 10 10 10 10 10	Inverness, FL 34450	
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	9311 E. Moccasin Slough Rd	
	(Itale: WITT DD I OST OTTTELL BOTT)	Inverness. FL 34450	
02/09/	/2007	L07000015185	
3. Da	te of filing/registration in Florida	4. Document number	
5. (a)) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
	Registered Agent:	BUSINESS FILINGS INCORPORATED	
	Registered Office Address:	1203 GOVERNOR'S SQUARE BLVD SUITE 101	
		TALLAHASSEE FL 32301-2960 US	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:	
	NEW Registered Agent:	James Horstman	
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	HORSTMAN FAMILY LLC 9311 E. Moccasin Slough Rd Inverness, FL 34450	
that all office hereby liability limited (Signatus James	limited liability company is not organized under the fter the change or changes are made, the Florida street of the registered agent will be identical. Or, in the cy confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company. Horstman I or typed name of signee)	laws of the State of Florida, it is hereby confirmed et address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited of organization or the operating agreement of the	
I here compl am fai F.S.\6 confir	by accept the appointment as registered agent and a y with the provisions of all statutes relative to the provision of all statutes relative to the provision of the provision o	oper and complete performance of my duties, and large registered agent as provided for in Chapter 608, change in the registered office address, I hereby a in writing of this change.	
FILING FEE: \$25.00			
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