## L070000027563

| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
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| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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DIVISION OF CURTON

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## **COVER LETTER**

| Division of Corporations  |
|---|
| SUBJECT: The Indigo Group Holding CO, 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:   |
| Stephen C. Himmel (Name of Person)  |
| The Indigo Group Hobbing CO, UC   |
| 11523 Palm Brush Trail Subje #124 (Address)   |
| Ba Bradenton F1 34202<br>(City/State and Zip Code)  |
| For further information concerning this matter, please call:  |
| Stephen C. Himmel at (941) 320 - 668 6 (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:   |
| ☐ \$55 Filing Fee & Certified Copy  |

INHS18 (8/05)

## 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.

| 1. The name of the limited liability company is: The Indigo Group Hole   | ding CO. L   |
|--|--|
| 2. The mailing address of the limited liability company is: 11523 Palm Brush   | Trail.   |
| Suite # 124 Bradenton, F1 34202  | •  |
| $\frac{3/19/2007}{3. \text{ Date of filing/registration in Florida}} \frac{L0700002750}{4. \text{ Document number}}$   | <u>3</u>   |
| 5. The name of the registered agent and the registered office address as shown on the records Florida Department of State:   | of the   |
| Seoff Scalera Name   |  |
| 12230 Holly bush Terr  |  |
| Bracleston F1 34202<br>City, State and Zip   | 07   |
| 6. The name and address of the new registered agent and/or office:   | ECRI<br>ISION  |
| Stephen C. Himmel  | SION OF CO   |
| Florida street address (P.O. Box NOT acceptable)   | Y OF STAI  |
| Bradenton FL 34202<br>City, State and Zip  | TIONS<br>22  |
|  |  |
| If the limited liability company is not organized under the laws of the State of Florida, it is he confirmed that after the change or changes are made, the Florida street address of the register and the business office of the registered agent will be identical. Or, in the case of a Florida li liability company, it is hereby confirmed that the change(s) was/were authorized by an affirm of the members of the limited liability company or as otherwise provided in the articles of or or the operating agreement of the limited liability company.  | red office<br>imited<br>pative vote                                  |
| (Signature of a member or authorized representative of a member)   |  |
| Stephen C. Humme! (Printed of typed name of signee)  |  |
| I hereby accept the appointment as registered agent and agree to act in this capacity. I furth comply with the provisions of all statutes relative to the proper and complete performance of and I am familiar with and accept the obligations of my position as registered agent as provided the configuration of the configuration | ner agree to<br>my duties,<br>ded for in<br>red office<br>is change. |

(Signature of Registered Agent)

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

INHS18 (8/05)