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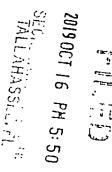
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## COVER LETTER

INHS18 (2/14)

TO: Registration Section Division of Corporations				
SUBJECT: Bright Beginnings of Dunedin,	, LLC			
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
Stephen C. Booth, Esq.				
Name of Person	<del></del>			
Booth & Cook, P.A.				
Firm/Company	<del></del>			
7510 Ridge Road				
Address	<del></del>			
Port Richey, FL 34668				
City/State and Zip Code				
jenna@bbdunedin.com				
E-mail address: (to be used for future annua	al report notification)			
For further information concerning this matter, pl	lease call:			
Stephen C. Booth, Esq.	727 842-9105			
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	\$55 Filing Fee & Certified Copy			

## 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.

1. N	ame of the limited liability company: Bright Beginn	ings of Du	unedin, LLC
2. (a)			
(_,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2811 Belcher Road	2	811 Belcher Road
	Dunedin, FL 34698	_ D	Dunedin, FL 34698
	3-19-07	LO	07000029333
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			
J. (a)	Registered Agent and Registered Office shown on the records of		ept. of State:
	Stephen C. Booth		
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS)	
	7510 Ridge Road		
	Port Richey FI	34668	
	, , ,,	·	<b>201</b>
(b)			190
	Enter name of NEW Registered Agent and/or NEW Registered	Office addres	s 2 T
	Lowell Suplicki		ZOISOCT 16 PM 5: 50 TALLIMASSEL SI
	NEW Registered Office Address:		
	2811 Belcher Road		5:50
	Dunedin	34698	)
the chagent was/w	limited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	ws of the Sta the register ability comp of the limited limited liab	red office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in bility company.  Il Suplicki
	attre of a member or authorized representative of a member	_	Printed or typed name of signee
provis the ob to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as fegistered agent as provide ely reflect a change in the registered office address, I do not in writing of this change.	ree to act in performanc d for in Cha hereby conf	this capacity. I further agree to comply with the ce of my duties, and I am Jamiliar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been
Signatu	uryof Registered Agent		

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