

L070000052991

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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N. O. AUG

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*Providing Aggressive Representation of Your Legal Rights*

**Admitted To:**

Florida Bar  
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\*Middle District of Florida\*  
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Florida Bar Association  
Indiana Bar Association  
Academy of Florida Trial Lawyers

August 3, 2009

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**SUBJECT:** Fort Huffstetler Adventures, LLC

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:

Morris Law Group, P.A.  
Robert Allen Morris, Jr., Esq.  
129 N. Main Street  
Brooksville, Florida 34601

For further information concerning this matter, please call:

Robert Allen Morris, Jr., Esq., at (352) 796-9999

Enclosed is a check for the following amount:

\$25 Filing Fee ☒

\$55 Filing Fee & Certified Copy ☐

Very truly yours,

MORRIS LAW GROUP, P.A.

Robert Allen Morris, Jr.

RAM/llp  
cc: Paulette Huffstetler

**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. Name of the limited liability company: Fort Huffstetler Adventures, LLC
2. (a) Principal office address of limited liability company: 1150 W. Jefferson Street  
**(Note: MUST BE STREET ADDRESS)** Brooksville, Florida 34601
- (b) Mailing address of limited liability company: 1150 W. Jefferson Street  
**(Note: MAY BE POST OFFICE BOX)** Brooksville, Florida 34601
3. Date of filing/registration in Florida: May 17, 2007
4. Document Number: L07000052991
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. Of State:

Registered Agent: Tresha P. Huffstetler

Registered Office Address: 10555 Rain Forest Rd., Brooksville, Florida 34601

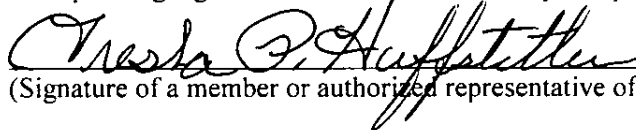
- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office Address:**

**NEW** Registered Agent: Robert Allen Morris, Jr., Esq.

**NEW** Registered Office Address: 129 N. Main Street

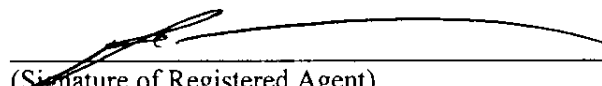
**MUST BE FLORIDA STREET ADDRESS:** Brooksville, Florida 34601

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is here confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the Articles of Organization of the Operating Agreement of the limited liability company.

  
(Signature of a member or authorized representative of a member)

Tresha P. Huffstetler  
(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

  
(Signature of Registered Agent)

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