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| (Re | equestor's Name) | | | | |
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| | | | | | |
| (Address) | | | | | |
| | | <u>. </u> | | | |
| (Ad | ldress) | | | | |
| (Cit | ty/State/Zip/Phone | #) | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Bu | siness Entity Name | e) | | | |
| | | | | | |
| (Do | cument Number) | | | | |
| Certified Copies | _ Certificates | of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
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S. HAWKES

MAY 2 9 2009

EXAMINER

COVER LETTER

| TO: | Registration Section Division of Corporations | | | | | | |
|--------|--|--------------------------|--------------|------------|----------------|------------------------------------|--------------|
| | | ~ 0 h 4 l | | | | | |
| SUBJI | SUBJECT: S&M Initiative, LLC Name of Limited Liability Company | | | | | | |
| | Traine of | Lime | a Braonne. | Compa | , | | |
| Dear S | ir or Madam: | | | | | | |
| The en | closed Registered Agent/Registered | Office (| Change a | nd fee(s) | are submitte | d for filing. | |
| Please | return all correspondence concerning | g this m | atter to th | e follow | ring: | | |
| | Mathea Houge | | | | | | |
| | Name of Person | | | | | | |
| | S&M Initiative, LLC | | | | | • | |
| | Firm/Company | | | | | J. S. 30 -4 | T |
| | | | | | | | |
| | 6445 Blue Grosbeak Circl | e | | | | 3 | BARRA |
| | Address | | | | | (g) 6 | Trail |
| | | | | | | | Ī |
| | Bradenton, FL 34202 | | | | | 29 - | ` 4 C |
| | City/State and Zip Code | | | • | | 99 MN 29 PM 1: 08 SECRETARY STATES | ı |
| E- | thhouge@yahoo.com mail address: (to be used for future annual report | notificati | on) | | | 71 | |
| For fu | ther information concerning this mat | tter, ple | ase call: | | | | |
| | Mathea Houge | at (| 941 |) | 373-64 | 146 | |
| | Name of Person | | A | rea Code & | Daytime Teleph | one Number | |
| | STREET/COURIER ADDRESS: | | MAT | LING AD | DRESS: | | |
| | Registration Section Registration Section | | | | | | |
| | Division of Corporations | Division of Corporations | | | | | |
| | Clifton Building | P.O. Box 6327 | | | | | |
| | 2661 Executive Center Circle Tallahassee, Florida 32301 | | Talla | hassee, Fl | orida 32314 | | |
| | Enclosed is a check for the following | ing am | ount: | | · | | |
| į | \$25 Filing Fee | | \$55 | Filing F | ee & Certifie | d Copy | |

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.

| Name of the limited liability company: | S&M Initiative, LLC | | | |
|---|--|--|--|--|
| 2. (a) Principal office address of limited liability company | ny: 6445 Blue Grosbeak Circle | | | |
| (Note: MUST BE STREET ADDRESS) | Bradenton, FL 34202 | | | |
| (b) Mailing address of limited liability company: | P.O. Box 20583 | | | |
| (Note: MAY BE POST OFFICE BOX) | Bradenton, FL 34204 | | | |
| 5/25/07 3. Date of filing/registration in Florida | L07000055803 4. Document number | | | |
| | | | | |
| 5. (a) Registered Agent and Registered Office shown on | the records of the Florida Dept. of State: | | | |
| Registered Agent: | CORPORATION SERVICE COMPANY | | | |
| Registered Office Address: | 1201 HAYS STREET TALLAHASSEE FL 32301 | | | |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEY</u> <u>NEW Registered Agent</u> : <u>NEW Registered Office Address:</u> | Mathea V. Houge 6445 Blue Grosbeak Circle | | | |
| (MUST BE FLORIDA STREET ADDRESS) | Bradenton. ,FL34202 | | | |
| 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 hereby 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 or the operating agreement of the limited liability company. | | | | |
| Signature of a member or authorized representative of a member | _ | | | |
| Mathea V. Houge Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provided I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company | gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change. | | | |
| Signature of Registered Agent | | | | |

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