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| (Re | equestor's Name) | |
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| (Ad | ldress) | |
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| (Ci | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Nar | me) |
| (Do | ocument Number) |) |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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S. PRATHER

COVER LETTER

| TO: Registration Section Division of Corporations |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SUBJECT: Bush By Branelee Gaer 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: |
| Craar, Brandee Name of Person |
| Blush By Brandee Garv Firm/Company |
| 14303 TILDEN ROAD Address |
| WINTER EMPOEN, FL 34787 City/State and Zip Code |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Brendel Gaar at (407) 844-7419 Name of Person Area Code & Daytime Telephone Number |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother 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 \$\Bigsize \text{\$55 Filing Fee & Certified Copy}\$ |

INHS18 (2/14)

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

| 2. (a) 14303 TELDEN ROWD Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) WINTER MUST BE STREET ADDRESS) WINTER POST OFFICE BOX) WINTER POST OFFICE BOX WINTER POST OFFICE BOX A Date of filing/registration in Florida Document number 5. (a) Brandul Gaen Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Office Address OUST BE FLORIDA STREET ADDRESS) WINTER POST OFFICE BOX A Document number Registered Office Address OUST BE FLORIDA STREET ADDRESS) WINTER Garden FL 34787 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: (4303 TIUDEN ROAD) |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3. Date of filing/registration in Florida 4. Document number 5. (a) Brandy Gaer Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 14303 TILDEN 2040 Winter Garden FL 34787 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: |
| 3. Date of filing/registration in Florida 4. Document number 5. (a) Brandel Gaen Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Office Address |
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| 5. (a) Brandic Gaer Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 14303 TILDEN 2040 Winter Gardin FL 34787 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: |
| Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 14303 TLDEN LOAD Winter Granden FL 34787 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: |
| 14303 TILDEN (2040) Winter Garden FL 34787 Winter Garden FL 34787 Winter name of NEW Registered Agent and/or NEW Registered Office address: |
| 14303 TILDEN (2040) Winter Garden FL 34787 Winter Garden FL 34787 Winter name of NEW Registered Agent and/or NEW Registered Office address: |
| (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Office Address: |
| (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: |
| Enter name of NEW Registered Agent and/or NEW Registered Office address: |
| Enter name of NEW Registered Agent and/or NEW Registered Office address: |
| |
| |
| (9303 17LDEN (20AD) |
| · |
| Winter Garden FL 34787 |
| 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 member of authorized representative of a member 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 605, 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 vriting of his change. |
| Signature of Redistrict Agent Division of Corporations P.O. Box 63270 Tallahosses El. 32314 |

FILING FEE: \$25.00