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SEP 1.7 2014

C. CARROTHETTE

COVER LETTER

PO: Registration Section Division of Corporations						
SUBJECT: Prickly Pair Enterprises LLC						
Name of Lim	ited 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:					
Martha Bibby						
Name of Person	· · · · · · · · · · · · · · · · · · ·					
Prickly Pair Enterprises LLC						
Firm/Company						
3104 Woodtop Drive						
Address						
Jacksonville, FL 32277						
City/State and Zip Code						
info@pricklypair.us						
E-mail address: (to be used for future annual report	rt notification)					
For further information concerning this matter, please c	all:					
Martha Bibby 23	39 293-4518					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS:	MAILING ADDRESS:					
Registration Section Division of Corporations	Registration Section Division of Corporations					
Clifton Building	P.O. Box 6327					
2661 Executive Center Circle	Tallahassee, Florida 32314					
Tallahassee, Florida 32301	<i>,</i>					
Enclosed is a check for the following amount:						
☑ \$25 Filing Fee	□ \$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.

1.	Na	me of the limited liability company: Prickly Pair E	nterpri	ses LLC	
2.	(a)	3104 Woodtop Drive	(b) 3104 Woodtop Drive		
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	('		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Jacksonville, FL 32277		Jackson	ville, FL 32277
		06/05/2007		L0700005	59282
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	Martha Bibby			
	(-)	Registered Agent and Registered Office shown on the records of t	he Florid	a Dept. of State	ı:
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	1901 1st Street North, #1106				
		Jacksonville Beach , FL	32250		
	(b)				
•	(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			PH 12: 18
		NEW Registered Office Address:			
		3104 Woodtop Drive			
		Jacksonville, FL	32277		
the age was the	cha ent v s/we arti Bignat herelovisi coblimere	mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia tree authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law accept the appointment as registered agent and agreement of all statutes relative to the proper and complete in igations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	the reginate the limited limit	stered office ompany, it is nited liability liability com rtha H Bib	and the business office of the registered shereby confirmed that the change(s) company or as otherwise provided in apany. by Printed or typed name of signee
Sig	gnatu	re of Registered Agent			

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