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Certified Copies Certificates of Status			
Special Instructions to I	Elling Officer		
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## **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJ			· · · · · · · · · · · · · · · · · · ·	
	Nan	ne of Limited Li	ability Company	
Dear S	Sir or Madam:			
The er	nclosed Registered Agent/Registered Off	ice Change and	fee(s) are submitted f	or filing.
Please	return all correspondence concerning th	is matter to the	following:	1
Davi	d W. Wilcox			
<u> </u>	Name of Person	• •	<del></del>	
Davi	d Wilcox, Atorney			İ
	Firm/Company		<del></del>	
308	13th St. W			
	Address		<del></del>	
Brad	enton, FL 34205			
	City/State and Zip Code		<del></del>	· 1
dwild	ox@wilcox-law.com			
I	E-mail address: (to be used for future and	nual report notif	ication)	
For fu	rther information concerning this matter	, please call:		
David	d W. Wilcox	941 at (	746-2136	
	Name of Person		Area Code & Dayti	me Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re <sub>l</sub> Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 lahassee, Florida 323	
	Enclosed is a check for the following	g amount:		
	<b>☑</b> \$25 Filing Fee	<b>□</b> \$5	55 Filing Fee & Certif	ied 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.

	me of the limited liability company:			
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(	(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	
	308 13th St. W.		308 13th	n St. W.
	Bradenton, FL 34205	<del></del>	Bradento	on, FL 34205
	7-27-2007		L0700007	77378
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	CT Corporation System			
J. (u)	Registered Agent and Registered Office shown on the records of	f the Flori	da Dept. of State	- 9:
	Registered Office Address (MUST BE FLORIDA STREET  1200 South Pine Island Road	ADDRES	<u>55)</u>	LVTTVIL BECIN
	Plantation	L 3332	4	EC -4
(b)	David W. Wilcox, Esq.  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office a	ddress:	AM 9 3
				\$ . <b>1</b>
	NEW Registered Office Address:			-
	308 13th St. W.			-
	Bradenton	L 3420	5	
the cha agent v was/we the arti	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the MGM.	of the reg liability of of the li e limited	sistered office company, it is mited liability	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.
_	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to merc	by accept the appointment as registered agent and as ions of all statutes relative to the proper and complet igations of my position as registered agent as provid ely reflect a dhange in the registered office address, i d in writing lift this dhange.	gree to a e perfori ed for in l hereby	ct in this cape nance of my of Chapter 605 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accep i. F.S. Or, if this document is being filed the limited liability company has been