LOSODOUS GAR

| (Requestor's Name) | | | | | | |
|-------------------------|------------------|-------------|--|--|--|--|
| . (Address) | | | | | | |
| (Address) | | | | | | |
| (Cit | y/State/Zip/Phon | e #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | | | |
| (Business Entity Name) | | | | | | |
| (Document Number) | | | | | | |
| Certified Copies | Certificate | s of Status | | | | |
| Special Instructions to | Filing Officer: | | | | | |
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2015 SEP 23 P 12: 54

SECRETARY OF SIAIR

SEP 24 2015

COVER LETTER

TO:

INHS18 (2/14)

Registration Section

| Divi | sion of Corporations | | | | | | | |
|------------------------------|---|---|--------------------------------------|--|--|--|--|--|
| SUBJECT: | Robin Hood Holdings, LLC | | | | | | | |
| SUBJECT. | Name of Limited Liability Company | | | | | | | |
| Dear Sir or N | Madam: | | | | | | | |
| The enclosed | d Registered Agent/Registered Of | fice Change and fee(s) are submitted for fil | ling. | | | | | |
| Please return | n all correspondence concerning th | nis matter to the following: | | | | | | |
| Joann And | derson | | | | | | | |
| | Name of Person | | | | | | | |
| Scott Hold | lings, LLC | | | | | | | |
| | Firm/Company | | 2015 SEC | | | | | |
| 3114 Croa | asdaile Drive | | 115 SEP 23 SECRETARY ALLAHASSE | | | | | |
| | Address | | 1.22 | | | | | |
| Durham, N | NC 27705 | | P 12: 54 OF STATE E. FLORIDA | | | | | |
| | City/State and Zip Code | . | SIL SIL | | | | | |
| joann.and | erson@scottholdings.com | | | | | | | |
| E-mail | address: (to be used for future an | nual report notification) | | | | | | |
| For further i | nformation concerning this matter | , please call: | | | | | | |
| Joann And | derson | 919 309-1022 | | | | | | |
| | Name of Person | Area Code & Daytime T | elephone Number | | | | | |
| Regi Divi Clift 266 | REET/COURIER ADDRESS: istration Section ision of Corporations ion Building I Executive Center Circle ahassee, Florida 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | | | | | | |
| Enc | losed is a check for the following | g amount: | | | | | | |
| ☑ \$ | 25 Filing Fee | S55 Filing Fee & Certified C | Сору | | | | | |

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: Robin Hood | d Holdi | ngs | , LLC | |
|------------------|----------------------|--|---|-------------------------------|--|--|
| 2. | (a) | 1877 S Federal Hwy | | (h) | 3114 Cı | oasdaile Dr |
| _, | (-) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | (-) | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | | Suite 310 | | | | |
| | | Boca Raton, FL 33432 | | | Durham | , NC 27705 |
| | | 02-12-08 | | Į | .080000 | 15679 |
| 3. | | Date of filing/registration in Florida | 4. | _ | | Document number |
| 5 | (a) | Jack S. Greenman | | | | |
| ٥, | (a) | Registered Agent and Registered Office shown on the records | of the Flo | rida l | Dept. of State | 5 |
| | | | | | | _ |
| | | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | | | | 1 |
| | | 1877 S Federal Hwy, Suite 310 | | _ | | ALS: 201 |
| | | Boca Raton | FL_3343 | 32 | | 2015 SEP SECRETA |
| | (b) | Chase Martin Scott | | | | TILED 2015 SEP 23 P SECRETARY OF S TALLAHASSEE, FL |
| | ` ` | Enter name of NEW Registered Agent and/or NEW Registered Office address: | | ress: | ت و چو | |
| | | | | | | 97 N |
| | | NEW Registered Office Address: | | | | Su Su |
| | | 1877 S Federal Hwy, Suite 310 | | | | |
| | | Boca Raton | _{FL_} 3340 | 32 | | _ |
| the age | cha ent v s/we | mited liability company is not organized under the age or changes are made, the Florida street address ill be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the member cless of organization or the operating agreement of the second organization or the operating agreement of the control of the co | of the re liability s of the he limite | gist cor limi d li | ered office npany, it is ted liabilit ability con | e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in apany. |
| | _1 | Trend | _ | ha | se Martir | Scott, President |
| | | are of a thember or authorized representative of a member | | | | Printed or typed name of signee |
| pro the to | obl obl nere | ny accept the appointment as registered agent and a ons of all statutes relative to the proper and comple gations of my position as registered agent as provi ly reflect a change in the registered office address, in yviting of this change. | igree to le perfo ded for i I herebj | act i rma n Ci v coi | in this cap nce of my hapter 605 nfirm that | acity. I further agree to comply with the duties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been |
| Sig | natu | of Registered Agen | | | | |