109000039557

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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COVER LETTER

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TO: Registration Section Division of Corporations	
SUBJECT:	Hoban McGuire, LLC
(Nam	ne of Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.
Please return all correspondence concerni	ng this matter to the following:
Tom Tyler	
(Name of Person)	
Thomas C. Tyler, Jr., P.A. (Firm/Company)	
(Firm/Company)	
735 East Venice Avenue, Suite	200
(Address)	
Venice, Florida 34285	
(City/State and Zip Code)	
For further information concerning this m	atter, please call:
Tom Tyler	at (<u>941</u>) <u>488-4422</u>
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the follow	ving amount:
✓ \$25 Filing Fee	☐ \$55 Filing Fee & Certified 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.

in the State of Florida.			
1. Name of the limited liability company:	Hoban McGuire, LLC		
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	Venice, Florida 34285		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	same as above		
4-23-2009 3. Date of filing/registration in Florida	L09000039557		
3. Date of ming/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:		
Registered Agent:	Thomas C. Tyler, Jr., P.A.		
Registered Office Address:	981 Ridgewood Avenue, Suite 104 Venice, Florida 34285		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW Registered Agent</u> :	W Registered Office address: Thomas C. Tyler, Jr., P.A.		
NEW Registered Office Address:	735 East Venice Avenue, Suite 200		
(MUST BE FLORIDA STREET ADDRESS)	Venice,FL_34285		
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the chareby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	et address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited of organization or the operating agreement of the		
(Signature of a member or authorized representative of a member) Daniel Hayes	the		
(Printed or typed name of signee)			
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pram familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified.	agree to act in this capacity. I further agree to roper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby ad in writing of this change.		
(Signature of Registered Agent)	v (227 Tallahassaa El 22214		
División of Corporations, P.O. Box 6327, Tallahassee, FL 32314			

FILING FEE: \$25.00

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