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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H13000196514 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number: I20070000020 Phone : (813)435-3176 : (813)333-6358 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address:

LLC REGISTERED AGENT CHANGE INGDAN, LLC

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Wednesday, September 04, 2013 09/13/2031 02:28 FAX 8133356358

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KICK SEKADLIN

H130001965143

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.

1. Name of the limited liability company: INGDAN, LLC			
2. (a) Principal office address of limited liability comp	any: 4955 SW 91ST AVENUE		
(Note: MUST BE STREET ADDRESS)	COOPER CITY, FL 33328	 ಪ	
	COS 211 31.77. 2 00020	13 SEP	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	4955 SW 91ST AVENUE	4 24	
		1 27	
	COOPER CITY, FL 33328	* C	
05/01/2009	L09000042557		
3. Date of filing/registration in Florida	4. Document number	AM 7: 56	
• •		26 John 1997	
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dep	t. of State:	
Registered Agent:	THE LAW OFFICES OF NICK SPRADLIN,	PLLC	
Registered Office Address:	18952 NORTH DALE MABRY HWY		
7B.000100 0.1700 1.1001	STE. 102		
	LUTZ, FL 33548		
NEW Registered Agent:	THE LAW OFFICES OF NICK SPRADLIN, I	PLLC	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	13007 W. LINEBAUGH AVENUE		
	SUITE 101	FL 33626	
	TOUT O	_,FL_33020	
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 a member or authorized representative of a member			
NICKOLAS J. SPRADLIN, AUTHORIZED REPRESENTATIVE OF A MEMBER Printed or typed name of signee			
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is heing filed to address, I hereby confirm that the limited liability comp	position as registered agent as primerely reflect a change in the re-	rovided for in gistered office	
Division of Corporations, P.O. Box	6327, Tallahassee, FL 32314		

INHS18 (05/08)

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