L10000052161

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EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: Rhino National Enterprises LLC Name of Limited 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:
Michael P Hazen Name of Person
Rhito National Enterprises LLC Firm/Company
1302 Lake Leene Ly # 203 ARRY 203
Brandon Fl 33511 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Hazer at (813) 952 3026 Name of Person at (813) 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 following amount:

\$55 Filing Fee & Certified Copy

\$25 Filing Fee

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.

agent, or both, in the state of 1 tortaa.	
1. Name of the limited liability company: Khivo	National Enterprises LLC
2. (a) Principal office address of limited liability compar	ny: 1302 Lake Lucerne wa
(Note: MUST BE STREET ADDRESS)	Branon Fl 33511
(b) Mailing address of limited liability company:	1300 Lake Licerne m
(Note: MAY BE POST OFFICE BOX)	Ste 203
05-14-2010	L10000052161
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept. of State:
Registered Agent:	Corporation Service Company
Registered Office Address:	1201 Hays Street Tallahasse Fl 32301
(b) Enter name of NEW Registered Agent and/or NI	CW Registered Office address:
NEW Registered Agent:	Michael P Dozen
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1302 Late Date on we had Ste 20 5 LN 1351
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be identiability company, it is hereby confirmed that the change (of the members of the limited liability company or as other or the operating agreement of the limited liability company.	Florida street address of the registers office nitical. Or, in the case of a Florida limited sees of a Florida limited see
Signature of a member or authorized representative of a member	
Michael P Huze Printed or typed name of signee	<u>~</u>
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address, I hereby confirm that the limited liability compared	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.

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

Signature of Registered Agent