L1000179211

(Requestor's Name)
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(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer

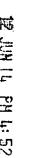
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B. KOHR JUN 1 8 2012 EXAMINER





COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: H - CAP 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:		
Jay A. Hutchinson		
Firm/Company		
12507 RIVERGIEN DR		
Riverview FL 33569 City/State and Zip Code		
Tayhutch @ UPCIZON, Net E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Tay A. Hutchinson at (813) 672-8325 Name of Person at (813) 672-8325 Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Cloft 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:		
\$25 Filing Fee \$\times \text{S55 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 608.5 liability company submits the following statement in order	08, Florida Statutes, the undersigned limited er to change its registered office or registered
agent, or both, in the State of Florida. 1. Name of the limited liability company:	AP, LLC
2. (a) Principal office address of limited liability company	y: 12507 Riverglen DR
(Note: MUST BE STREET ADDRESS)	Riverview FC 33569
(b) Mailing address of limited liability company:	12507 Riverglen DR.
(Note: MAY BE POST OFFICE BOX)	Riverview, Fl 33569
6-10-12	L1000007921
3. Date of filing/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:	Jay A states corporation
Registered Office Address:	13302 VINRING DAKS BIV
	Suite 100-A Tampa, FL 33612 US
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	Jay A. Hutchinson SR
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	12507 Riverglen DR
(MUST BE FLORIDA STREET ADDRESS)	Biverview ,FL 33569
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member. Printed or typed name of signee.	Clorida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my per Chapter 608, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability company. Signature of Registered Agent	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.
U Division of Corporations, P.O. Box 63 FILING FEE: S	·