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B. BOSTICK

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EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJ	ECT:Name or		AP d Liab					_
Dear S	Sir or Madam:					,		
The en	nclosed Registered Agent/Registered	Office	Chang	e and	fee(s) a	re submitt	ted for filing.	
Please	return all correspondence concerning	ıg this n	atter t	o the i	followi	ng:		
	Ira Marcus, Esq.							
	Name of Person					•	•	
	Ira Marcus, P.A.							
	Firm/Company			<u></u>				_
							VIII SPI	;
	1313 South Andrews Ave	UA					LAHASSI	<u>,</u>
	Address						**	,
	Fort Lauderdale, FL 3331	6					RY OF STATE	
	City/State and Zip Code						RAT (. .n
E-1	ira@iramarcuspa.com	notification	on)				DE V	٥
	ther information concerning this mat		•	l:				
	Ira Marcus	at (_	954	_)_	<u></u>	523-96		_
	Name of Person			Area C	ode & Da	ytime Teleph	one Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Rep Div P.C	gistrati vision o). Box		ion	·	
	Enclosed is a check for the following	ing amo	unt:					
	\$25 Filing Fee		□ \$5	5 Fili	ng Fcc	& Certifie	:d Сору	

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:	HAP I, LLC				
2. (a) Principal office address of limited liability compan	y: 4528 Gloria Avenue				
(Note: MUST BE STREET ADDRESS)	C/O Vernon Industrial Park, LLC Encino, CA 91436				
(b) Mailing address of limited liability company:	4528 Gloria Avenue				
(Note: MAY BE POST OFFICE BOX)	c/o Vernon Industrial Park, LLC Encino, CA 91436				
08/16/2010	L10000085788				
3. Date of filing/registration in Florida	4. Document number				
5. (a) Registered Agent and Registered Office shown on	<u>-</u>				
Registered Agent:	NAPLES-LAWDOCK, INC.				
Registered Office Address:	1395 Panther Lane, Ste. 300 Naples, FL 34109				
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:					
NEW Registered Agent:	ira Marcus, Esq.				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Ira Marcus, P.A. 1313 South Andrews Avenue				
MODI DE LEVALDA GIALLEI ADDALLIST	Fort Lauderdale ,FL33316				
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 Frinted or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. If further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am agmitted withfand accept the obligations of my position as registered agent as provided for in Chapter 608 If S. Or if this document is being filed to merely reflect a change in the registered office address. Includes contributed liability company has been notified in writing of this change. Signature of agistered Agent Real MARCH Signature of agistered Agent Real MARCH Signature of agistered Agent					
Division of Corporations, P.O. Box 63	27, Tallahassee, FL 32314				
FILING FEE: \$25.00					