L10000116151

| | (Requestor's Name) | | | |
|---|--------------------------|--|--|--|
| | (Address) | | | |
| | (Address) | | | |
| | (City/State/Zip/Phone #) | | | |
| PICK-U | P WAIT MAIL | | | |
| <u> </u> | (Business Entity Name) | | | |
| (Document Number) | | | | |
| Certified Copies | Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | | |
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COVER LETTER -

| Division of Corporations | | | | |
|--|---|--|--|--|
| SUBJECT: TReehouse Kenr | nels LLC nited Liability Company | | | |
| Name of Lift | шеа глаонну Сотрану | | | |
| Dear Sir or Madam: | | | | |
| The enclosed Registered Agent/Registered Office Chan | ge and fee(s) are submitted for filing. | | | |
| Please return all correspondence concerning this matter | to the following: | | | |
| KAY E HARRIS Name of Person | | | | |
| TREEHOUSE KenneLS Firm/Company | | | | |
| 18411 DEASON DR Address | | | | |
| Spring Hill FL 34 City/State and Zip Code | 1610 | | | |
| E-mail address: (to be used for future annual repo | iL. com rt notification) | | | |
| For further information concerning this matter, please call: | | | | |
| KAY F HARRIS at (| 352, 797 – 7853 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: | | | | |
| □ \$25 Filing Fee | □ \$55 Filing Fee & Certified Copy | | | |
| | | | | |

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. Na | une of the limited liability company: <u>TRechouse</u> k | ennels | LLC |
|---|---|---|--|
| | 10011 Deal Deal | | |
| - (w) | | Mailing address of limited (Note: MAY BE POST | I liability company: |
| | | | |
| | 11-0-2010 | 10000 116 | 151 |
| 3. | $\frac{1/-8-2010}{\text{Date of filing/registration in Florida}} \qquad \frac{1}{4}.$ | Document number | |
| 5. (a) | Registered Agent and Registered Office shown on the records of the Florida Dept. of Sta | _ te: | |
| | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | _ | |
| | 18411 Deason DA Spring Hill .FL 34610 | _ | |
| | Spring Hill .FL 34610 | | 2 |
| (b) | KAY E HARRIS | ン ロー - :: | F11_1 |
| | Enter name of NEW Registered Agent and/or NEW Registered Office address: | ; | FEB25 A |
| | 18411 DeAson DR | ·· | |
| | NEW Registered Office Address: | <u>.</u> | ± 0 |
| | 5 pRing Hill, FL 34610 | - - = | M 9: 01 |
| | , FL | <u>-</u> | |
| the cha agent v was/we | imited liability company is not organized under the laws of the State of Flunge or changes are made, the Florida street address of the registered office will be identical. Or, in the case of a Florida limited liability company, it are authorized by an affirmative vote of the members of the limited liability corresponds to the operating agreement of the limited liability corresponds. | te and the business of is hereby confirmed to the company or as other | fice of the registered hat the change(s) |
| | | Printed or typed rhine of | Fee of signed |
| I here provisi the obl to mere | by accept the appointment as registered agent and agree to act in this capions of all statutes relative to the proper and complete performance of my igations of my position as registered agent as provided for in Chapter 60 ely reflect a change in the registered office address. I hereby confirm that if it writing of this change. | oacity. I further agred duties, and I am fam 5, F.S. Or, if this doc the limited liability o | e to comply with the iliar with and accept cument is being filed company has been |
| Signatu | Of Registered Agent | | |