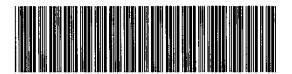
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(Requestor's N	Name)				
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07/25/16--01010--023 **25.00

J. HARRES

COVER LETTER

Division of Corporations					
SUBJECT: Positive Control International, CCC Name of Limited Liability Company					
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:					
Angela Danielson Name of Person					
Positive Control International, LCC Firm/Company					
7133 Commercial way Address					
Weeki Wachee FL 34613 City/State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Angela Danielson at (352) 345-7743 Name of Person 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	me of the limited liability company: Positive	Com	rol Int	ternational, LCC	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (b)		ng address of limited liability company	 y:
	7133 commercial way		7133	3 Commercial WA	4
	Weeki WAChee FL 34613			ci Wacher FL 34	
	06-09-2011		41100	00067356	
3.	Date of filing/registration in Florida	4.		cument number	
5. (a)	Registered Agent and Registered Office shown on the records of the	ne Florida I	Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET A 13499 Chambord ST Brooksville ,FL		1 2	16 JUL 25 TALLAHASI	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	<u> </u>		PH 1: 43 SEF. FLORIDA	
	NEW Registered Office Address:		·		
	7133 Commercial WA	4			
	Weeki Wachee ,FL	346	13		
the cha agent v was/we the arti Signa I herei provisi the obl to mere	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law of a member or authorized representative of a member by accept the appointment as registered agent and agreeing of a statutes relative to the proper and complete in its properties of a member of a memb	the regist bility con f the limit limited lia	ered office and appany, it is her led liability company with the led liability company with this canacity.	the business office of the regineral confirmed that the change impany or as otherwise provided by. Say James of signee to comply with the further garage to comply with the change in the the c	(s) d in
Signatu	re of Registered Agent				

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