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SECRETARY OF STATE
AND ANASSEE FLORIDA

S. YOUNG NOV 1 8 2015

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BOBCAT PROPERATE Name of Limited	EET ES, LLC d Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change a	and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to t	the following:
OLEN VAUGHN Name of Person	
BOBCAT PROPERTIE	<u>55</u>
Firm/Company	ER 5 T
1622 RIVER ROAD	SSE I
Address	
MAUMEE OH 439 City/State and Zip Code	PR STATE 29
City/State and Zip Code	•
GEVAUGHN@ AOL.	com
E-mail address: (to be used for future annual report no	otification)
For further information concerning this matter, please call:	
GLEN VAUGHN at (4)	19,343-0285
Name of Person	Area Code & Daytime Telephone Number
Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$25 Filing Fee

Enclosed is a check for the following amount:

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.

i ioriuu.	\sim 0
1. Nam	ne of the limited liability company: BOBCAT PROPERTIES, LLC
2. (a)	(b)
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
_	1622 RIVER ROAD 1622 RIVER ROAD
_	MAUMEE, OH 43537 MAUMEE, OH 4353
_	23 June 2011 L11000070978
3.	Date of filing/registration in Florida 4. Document number
5. (a)	JANET M. STRICKLAND
\ , , 	egistered Agent and Registered Office shown on the records of the Florida Dept. of State:
_	
R	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
_	2340 PERIWINKLE WAY J-1 PS 5
_	
(b)	COLEN VAUGHN
` ,	inter name of NEW Registered Agent and/or NEW Registered Office address:
	POINTE SANTO DE SANIBEZ, E 4 PET 29
<u>N</u>	NEW Registered Office Address:
-	2445 WEST GULF DRIVE
-	SANIBEL ,FL 33957
the chang agent wil was/were	itted liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after go or changes are made, the Florida street address of the registered office and the business office of the registered libe identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in each organization or the operating agreement of the limited liability company.
Signature	e of a member or authorized representative of a member CLEN VAUGH Printed or typed name of signee
I hereby provision the oblige to merely notified i	accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the as of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed a change in the refistered office address, I hereby confirm that the limited liability company has been writing of this charge.