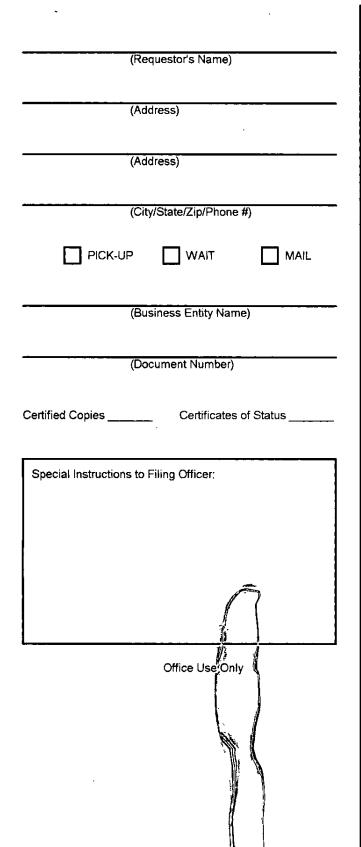
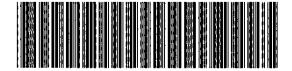
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N. O. W. AUG - 7 20121

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Suacks Name of Limite	d 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:		
	_	
111 6		
Terry W. Sovan		
/ Name of Person		
and a		
TIC Cucho 110		
Firm/Company	<u> </u>	
i mucompany		
$\rho_{\alpha}$		
1.0. Dox 2174		
Address		
1) 22 621		
DAUCA 2017 F1 33036		
City/State and Zip Code		
TTW 1111 @ AUC. COM		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Terry W. Souza at (2)	V12 \ 21 - 61/10	
Name of Person	Area Code & Daytime Telephone Number	
/ Name of Forting	Alca Code de Dayanne Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
\$25 Filing Fee		
1/1825 Filing Fee	\$55 Filing Fee & Certified Conv	

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

Pursuant to the provisions of sections 608.416 or 608.50 liability company submits the following statement in order agent, or both, in the State of Florida.	r to change its registered office or registered
1. Name of the limited liability company:	Seacher GCC
2. (a) Principal office address of limited liability company	: 23 8H STO TUE
(Note: MUST BE STREET ADDRESS)	Winter Horizon 3 State
(b) Mailing address of limited liability company:	75 Sunch Red Go
(Note: MAY BE POST OFFICE BOX)	Daciport H 3554.36
12-28-2011	C110000 76726
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:
Registered Agent:	Coxporation Service Congrey
Registered Office Address:	1201 Hays ST.
	32301 US
(b) Enter name of NEW Registered Agent and/or NEV	V Registered Office address:
NEW Registered Agent:	Terry W SOUZA
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	203 8th ST NE
If the limited liability company is not organized under the liconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be ident 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	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization
Signature of a member or authorized representative of a member	-
Printed or types name of signee	-
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prought tam familiar with and accept the obligations of my pocapter 608, F.S. Or, if this document is being filed to me quaress, I hereby confirm that the limited liability company	gree to act in this car acity. I further agree to oper and complete pe formance of my duties, sition as registered arent as provided for in the registered office
In W. Jon -	v has been notified in writing of this change.
Signature of Registered Agent  Division of Corporations, P.O. Box 63	

FILING FEE: \$25.00