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FAX (863) 682-8031

www.PetersonMyers.com

February 17, 2014

Division of Corporations Registration Section Post Office Box 6327 Tallahassee, Florida 32314

Re:

Restoration Holdings, L.L.C.

Dear Sir/Madam:

Please find enclosed Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company form for the above referenced entity. Also enclosed is a check reflecting the \$25.00 filing fee. Should you have any questions, please do not hesitate to contact me.

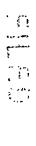
Sincerely

Kevin Knowlton, Esq.

Enclosures KCK/lkm

cc: Kenneth Compton

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Restoration Holdings, L.L.C.

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:

Kevin C. Knowlton

Name of Person

Peterson & Myers, P.A.

Firm/Company

225 E. Lemon Street, Ste. 300

Address

Lakeland, Florida 33801

City/State and Zip Code

kknowlton@petersonmyers.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin Knowlton

...863 \ 68

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

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INHS18 (5/08)

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.

agoin, or oom, mine brane of 1 formal.		
1. Name of the limited liability company: Restoration Holding	98, L.L.C.	
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	any: 6643 Hayter Drive Lakeland, Florida 33813	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	6643 Hayter Drive Lakeland, Florida 33813	
08/30/2011	L110000 99 403	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown of		rida Dept. of State:
Registered Agent:	Jonn D. Hoppe	720
Registered Office Address:	225 E. Lemon Street	THE PERMIT
	Suite 300 Lakeland, Florida 33801	7 10 44 Aug 1
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	Kevin C. Knowiton	auur ess.
NEW Registered Office Address:	225 E. Lemon Street	
(MUST BE FLORIDA STREET ADDRESS)	Suite 300	EI 20004
	Lakeland	,FL_33801
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be id liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company	e Florida street address of entical. Or, in the case of e(s) was/were authorized wise provided in the arti	f the registered office f a Florida limited
Signature of a member or authorized representative of a member		
Lenneth W. (and		
Printed or typed name of signee		•
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this cap proper and complete per position as registered as merely reflect a change i any has been notified in	pacity. I further agree to rformance of my duties, gent as provided for in in the registered office writing of this change.
Companyon of Manistrand Agent		

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