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SECRETARY OF STATE

AUG 1 4 2012

T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: VIDA HORSES, LLC Name of Lin	nited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offi	ice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning the	is matter to the following:	
Gregory A. Sanoba, Esquire		
Name of Person		
The Sanoba Law Firm		
Firm/Company		
422 South Florida Avenue Address		
. Address		
Lakeland, Florida 33801		
City/State and Zip Code		
greg@sanoba.com E-mail address: (to be used for future annual report notif	ication)	
For further information concerning this matter,	please call:	
Gregory A. Sanoba	at (863) 683–5353	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section 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	\$55 Filing Fee & Certified Copy	

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.

1. Name of the limited liability company: VIDA HORS	SES, LLC
2. (a) Principal office address of limited liability compar	ny: 6229 Deen Still Road
(Note: MUST BE STREET ADDRESS)	Lakeland, Florida 33809
(b) Mailing address of limited liability company:	6229 Deen Still Road
(Note: MAY BE POST OFFICE BOX)	Lakeland, Florida 33809
April 23, 2012	L12000054446
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of State:
Registered Agent:	Alejandro Villanueva-Decasa
Registered Office Address:	6229 Deen Still Road
-	Lakeland, Florida 33809
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> : <u>NEW Registered Office Address:</u>	Alejandro Villanueva-DaCasa 6229 Deen Still Road
(MUST BE FLORIDA STREET ADDRESS)	Lakeland ,FL 33809
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 idealiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or number the trepresentative of a member the limited of a member of a	Florida street address of the registered office, ntical. Or, in the case of a Florida limited of (s) was/were authorized by an affirmative vote erwise provided in the articles of organization.
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my I Chapter 608, F.S. Or, if this document is being filed to a address. I hereby confirm that the limited liability compa	l agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in nerely reflect a change in the registered office uny has been notified in writing of this change.

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

Signature of Registered Agent