

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
•	,	
	y/State/Zip/Phon	
(Cit	.y/State/Zip/Phon	ie #)
	MAIT	MAIL MAIL
☐ PICK-UP	LI WALL	☐ WAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
(-		,
0.275-1.0-23-	0 - 117 - 1	100
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
·	-	
,		ŧ
name chna		
		114/16
Mama china	11/0	11/28/10
THE CHUNG	<u> </u>	
	Office Use Or	nlv



15 NOV 25 PH 2: 1



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 27, 2015

HOLDER BROTHERS PROPERTY IMPROVEMENT LLC 8730 SE 120TH STREET BRONSON, FL 32621

SUBJECT: HOLDER BROTHERS PROPERTY IMPROVEMENT LLC

Ref. Number: L12000069340

In a recent audit of our records, we have determined that the above named entity has designated itself as Registered Agent.

The purpose of this letter is to advise you a business entity may not serve as its own Registered Agent. We are asking you to designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please complete the enclosed Statement of Registered Office or Registered Agent form for filing at no charge. Return the completed form to my personal and confidential attention. The address is listed below.

This letter is to be considered your 60 day notice that your entity will be subject to administrative dissolution or revocation if this error is not corrected by December 29, 2015.

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Stacy Prather
Regulatory Specialist III

Letter Number: 015A00022750

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

()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)		_	of limited liability company: BE POST OFFICE BOX)
		<u> </u>		·····	
			1 14	1000	0069340
3.	Date of filing/registration in Florida	4.		Document n	umber
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of Sta		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		_	
				•	
				- -	SECRE TALLAH
(b)	Tracey J. Hurley			- -	FILE 15 NOV 25 PA SECRETARY LA
(b)		Office add	ress:	- -	, market

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent