

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC

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Fax Number

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address:

> LLC REGISTERED AGENT CHANGE WESTCHASE INFLATABLE FUN. LLC

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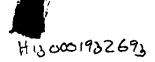
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Thursday, August 29, 2013 09/07/2031 03:08 FAX 8133336358



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.

2. (a) Principal office address of limited liability compa	ATABLE FUN, LLC	<u>-</u>
(Note: MUST BE STREET ADDRESS)	ny: 10810 BUCKSKIN PLACE	TS P
(Note: MUST BE STREET ADDRESS)	TAMPA, R. 33626	
	17MFA, PC 33026	
(h) Mailing address of limited liability assurance	HOMEO DI KOMONINA DI ACCE	55
(b) Mailing address of limited liability company:	10810 BUCKSKIN PLACE	ا ــــــــــــــــــــــــــــــــــــ
(Note: MAY BE POST OFFICE BOX)		<u> </u>
	TAMPA, FL 33626	:n
		_t1
06/12/2012	L12000077920	
3. Date of filing/registration in Florida	4. Dominant augher	2022
3. Date of mingregistration in Profita	4. Document number	동글
5. (a) Registered Agent and Registered Office shown of	n the records of the Florida Dept. o	of State:
Registered Agent:	THE LAW OFFICES OF NICK SPRADLIN, PLLI	c
Registered Office Address:	18952 NORTH DALE MABRY HWY	
. 🖰	SUITE 102	
	LUTZ, FL 33548	
NEW Registered Agent:	CRAIG PERKINS	
NEW Registered Office Address:	10810 BUCKSKIN PLACE	
(MUST BE FLORIDA STREET ADDRESS)		
	TAMPA	FL 33626
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 the members of the limited liability company or as otherwise.	ntical. Or, in the case of a Florida s) was/were authorized by an affir	limited mative vote of
the operating agreement of the limited liability company.	The provided in the affects of orga	anization or
the operating agreement of the limited liability company.	—	anization or
Signature of a member or authorized representative of a member CRAKE PERKINS	—	anization or
Signature of a member or authorized representative of a member CRAIG PERKINS	—	anization or
Signature of a member or authorized representative of a member CRAIG PERKINS Printed or typed name of signee	_ _	anization or
Signature of a member or authorized representative of a member CRAIG PERKINS Printed or typed name of signee	_ _	anization or
Signature of a member or authorized representative of a member CRAIG PERKINS Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pand I am familiar with an accept the obligations of my pand I am familiar with a manufacture of a member.	agree to act in this capacity. I fur roper and complete performance o osition as registered agent as pro verely reflect a change in the regis ny has been notified in writing of t	anization or
Signature of a member or authorized representative of a member CRAIG PERKINS Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pandier old, F.S. Or, if this document is being filed to maddrefs, I hereby confirm that the limited liability company. Signature of Registered Agent	agree to act in this capacity. I fur roper and complete performance o osition as registered agent as pro verely reflect a change in the regis ny has been notified in writing of t	anization or
Signature of a member or authorized representative of a member CRAIG PERKINS Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my phanter old, F.S. Or, if this accument is being filed to mad address, I hereby confirm that the limited liability company. Signature of Registered Agent Division of Corporations, P.O. Box 6	agree to act in this capacity. I fur roper and complete performance o osition as registered agent as pro verely reflect a change in the regis ny has been notified in writing of t	anization or