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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: LIVE STEAMER	PARTS LLC Liability Company	
waine of Children	Liaonity Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change at	nd fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the	ne following:	
ANDREW (NINN) Name of Person		
LIVE STEAMER PARTS LLC Firm/Company	<u></u>	
12717 PECAN TREE DR. Address		
HUNSONS, FL. 34669 City/State and Zip Code		
E-mail address: (to be used for future annual report no	Com, Lification)	
For further information concerning this matter, please call:		
ANDREW WINN at (47) Name of Person	771 - 0450 Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount:		
■ \$25 Filing Fee	\$55 Filing Fee & Certified Copy	
INHS18 (2/14)		

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.

1. Name of the limited liability company:	MER PARTS, LLC
2. (a) LIVE STEAMER PARTY LLC (b) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
12717 PECAN TREE DR. HUDSON FL. 34669	
	1-12000105.966
3. Date of filing/registration in Florida 4. 5. (a) WILLIAM DONATI OLD AC. Registered Agent and Registered Office shown on the records of the Florida Dept. of S	
1605 RIDGE TOP DR Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
TARPON SPRINCS FL 34682	1020 APR: 29
(b) HNDREW WING Enter name of NEW Registered Agent and/or NEW Registered Office address:	
12717 PEAN TREE DR, NEW Registered Office Address:	—
HUDSON FL 34669	_ _
If the limited liability company is not organized under the laws of the State of change or changes are made, the Florida street address of the registered office agent will be identical. Or, in the case of à Florida limited liability company, i was/were arthorized by an affirmative vote of the members of the limited liability company of the articles of organization or the operating agreement of the limited liability company.	and the business office of the registered it is hereby confirmed that the change(s) litty company or as otherwise provided in ompany.
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 constitution of all statutes relative to the proper and complete performance of the obligations of my position as registered agent as provided for in Chapter to to merely reflect a change in the registered office address. I hereby confirm the notified in writing of this change.	apacity. I further agree to comply with the ay duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed at the limited liability company has been
Signature of Registered Agent	

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