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### **COVER LETTER**

TO: Registration Section
Division of Corporations

Funderhand, LLC.

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:

John D. Granger

Name of Person

Funderhand, LLC

Firm/Company

6152 Raleigh St. #1001

Address

Orlando, Florida 32835

City/State and Zip Code

johndavidgranger@gmail.com

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

For further information concerning this matter, please call:

Doris S. Granger

\_407

2744224

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

## 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: Funderhand	1, LLC
2. (a) Principal office address of limited liability co (Note: MUST BE STREET ADDRESS)	ompany: 6152 Raleigh St. #1001 Orlando, Florida 32835
(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	PO Box 113 Windermere, Florida 34786
October 08, 2012	L12000127782
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	wn on the records of the Florida Dept. of State:
Registered Agent:	Business Filings Incorporated
Registered Office Address:	515 E. Park Avenue
(b) Enter name of <u>NEW Registered Agent</u> and/	or NEW Registered Office address:
NEW Registered Agent:	John David Granger, CMO
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	
	Orlando ,FL 32835
If the limited liability company is not organized und confirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the chathe members of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company.	e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote of
John David Granger Printed or typed name of signee	<del></del>
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, hereby confirm that the limited liability co	nt and agree to act in this capacity. I further agree to the proper and complete performance of my duties, f my position as registered agent as provided for in d to merely reflect a change in the registered office ompany has been notified in writing of this change.

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

Signapare of Registered Agent