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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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| Division of Corporations |
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| SUBJECT: Change of Registered Agent Name of Limited Liability Company |
| Traine of Emilion Elastics, 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: |
| Andrew S. Renfroe |
| Name of Person |
| Bird Dos Holdinss LLC |
| Firm/Company |
| 115 Point Circle |
| Address |
| Tequesta FL. 33469 |
| City/State and Zip Code |
| andyrenfroe @ comcast. Net |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Andrew Renfroe at 561 254 1199 |
| 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: |

□ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

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: Bird Do | os Holdings LLC |
|--|---|
| 2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | 115 Point Circle Tequesta, FL, 33469 |
| (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | same as above |
| 1/8/2013 3. Date of filing/registration in Florida 4 | |
| | |
| 5. (a) Registered Agent and Registered Office shown on the | |
| Registered Agent: | Corporation Service Company |
| Registered Office Address: | 1201 Hays Street Tallahassee, FL. 32301 |
| | |
| (b) Enter name of NEW Registered Agent and/or NEW | Registered Office address: |
| NEW Registered Agent: | Andrew S. Renfroe |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | 115 Point Circle |
| | Tequesta ,FL 33469 |
| If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identic liability company, it is hereby confirmed that the change(s) the members of the limited liability company, or as otherwise the operating agreement of the limited liability company. | orida street address of the registered office |
| Signature of a member or authorized representative of a member | 13 SEP |
| the solution | 13 SEP |

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