

L13000017801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400256045924

01/30/14--01010--002 \*\*25.00

FILED  
14 JAN 30 AM 10:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch FEB 11 5 28 PM

**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: HOG HOLDINGS LLC

2. (a) Principal office address of limited liability company: 1830S BISCAYNE BLVD  
SUITE 401  
AVENTURA FL 33160  
**(Note: MUST BE STREET ADDRESS)**

(b) Mailing address of limited liability company:  
**(Note: MAY BE POST OFFICE BOX)**

2/4/2013  
3. Date of filing/registration in Florida

4. Document number L13000017000

5. (a) Registered Agent and Registered Office shown on the records of the Florida Department of State:

Registered Agent:

IFO REGISTERED AGENTS LLC

Registered Office Address:

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

NEW Registered Office Address:  
**(MUST BE FLORIDA STREET ADDRESS)**

1830S BISCAYNE BLVD  
SUITE 401  
AVENTURA FL 33160

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]  
Signature of a member or authorized representative of a member

DANIEL A. CABADIE  
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 608, 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]  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00