13000052868

(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



700253927657

13 DEC -5 P# 4: NS

2013 DEC -5 AM 9: 46 FILED

CEC - 6 2013 T. HAMPTON

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

12/5/13

NAME:

HARBOR RETIREMENT HOLDINGS, LLC

TYPE OF FILING: CHANGE OF AGENT

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

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: HARBO	OR RETIREMENT HOLDINGS, LLC
2. (a) Principal office address of limited liability comp	
(Note: MUST BE STREET ADDRESS)	Vero Reach El 32963
(b) Mailing address of limited liability company:	Vero Beach, FL 32963
(Note: MAY BE POST OFFICE BOX)	<u> </u>
April 10, 2013	L13000052868
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
Registered Agent:	F & L CORP.
Registered Office Address:	ONE INDEPENDENT DRIVE SUITE 1300 JACKSONVILLE, Florida 32202-5017
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	NEW Registered Office address: National Corporate Research, Ltd., Inc. 155 Office Plaza Drive
	Tallahassee JFL 32301
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 of a member of adultorized representative of a member	
Printed or typed name of signee I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of a Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability con	md agree to act in this capacity. I further agree to we proper and complete performance of my duties, my position as registered agent as provided for in o merely reflect a change in the registered office upany has been notified in writing of this change.

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

Signature of Registered Agent