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COVER LETTER

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TO: Registration Section Division of Corporations		
TERRA ENTERPRISES, LLC	;	
	Name of Limited L	iability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registere	d Office Change and	fee(s) are submitted for filing.
Please return all correspondence concerni	ing this matter to the	following:
VICTOR J.TROIANO, ESQ.		
Name of Person		
MILLER TROIANO, P.A.		
Firm/Company		
P.O. BOX 8169		
Address		
LAKELAND, FL 33802-8169		
City/State and Zip C	ode	
natguzman06@gmail.com		
E-mail address: (to be used for future	re annual report notifi	cation)
For further information concerning this m	natter, please call:	
VICTOR J. TROIANO, ESQ.	863 at (688-7038
Name of Person		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:

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.

I. N	ame of the limited liability company:TERRA_ENTERP	RISES	S, LLC	
2. (a)	12470 Vittoria Way	(b) 12470 Vittoria Way		
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Ft. Myers, FL 33912		Ft. Myers,	FL 33912
	April 12, 2013	<u> </u>	L130000565	14
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Victor J. Troiano			
2. (,	Registered Agent and Registered Office shown on the records of the	he Flo	rida Dept. of State	7. B
	Registered Office Address	DDRI	<u> </u>	超年
	317 S. Tennessee Avenue			FILED FILED
	Lakeland	33801	0	图 6: 5.
(b)	Natalia Guzman Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> of the second se	Office	address:	ି _ଅ ଫ
	NEW Registered Office Address:			
	12470 Vittoria Way			
	Fort Myers , FL	33912	_	
change agent v was/we the\arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law.	regist bility Ethe l imite	ered office and company, it is imited liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
Signa	ture of a member or authorized representative of a member	_		Printed or typed name of signee
provisi the obl to mere notified	by accept the appointment as registered agent and agre ins of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	erior	mance of my d	uties, and Lam familiar with and accent-
	re of Registered Agent			