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## COVER LETTER

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**Division of Corporations** 6482 Investments, LLC SUBJECT: 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: Brian Hamsher Name of Person 6482 Investments, LLC Firm/Company 9225 Ulmerton Road, Suite K Address Largo/FL 33771 City/State and Zip Code hamsher@tampabay.rr.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Brian Hamsher Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations **Division of Corporations** 

Enclosed is a check for the following amount:

**☑** \$25 Filing Fee

Clifton Building

2661 Executive Center Circle Tallahassee, Florida 32301

□ \$55 Filing Fee & Certified Copy

Tallahassee, Florida 32314

P.O. Box 6327

TO:

Registration Section

## 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.

1. N	ame of the limited liability company: 6482 Investme	ents, LLC	
2. (a)	9225 Ulmerton Rd, Ste. K, Largo, FL 33771	<sub>(b)</sub> 9225 U	lmerton Rd, Ste. K, Largo, FL 3377
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ ` ,	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	5/22/2013	L130000	74860
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Brian Hamsher		<u> →</u> >0
J. (a)	Registered Agent and Registered Office shown on the records of the	he Florida Dept. of Sta	
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	- IT BH TANKER TO A SEE THE PARTY OF THE PAR
	Largo	33773	2: 08
	Enter name of NEW Registered Agent and/or NEW Registered	Office adur <u>ess</u> :	· _
	NEW Registered Office Address:		
	9225 Ulmerton Road, Suite K	W.W.	_
	Largo , FL	33771	
the chagent was/w the art	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia erro authorized by an affirmative vote of the members of its of organization or the operating agreement of the started of a member or authorized representative of a member	the registered office ability company, it if the limited liability continuited liability company in the liability continuited liabil	re and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.  Printed or typed name of signee
	eby accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided refer a change in the registered office address, I have a change in the registered office address, I have a constant of this change.	ee to act in this cap performance of my d for in Chapter 60 hereby confirm that	pacity. I juriner agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been

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