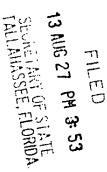
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Office Use Only



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K.SALY EXAMINER AUG 29 2013

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Horizon	Key LLC			
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:				
Jonathan S. Jenn Name of Person Honizon Key Ll	nings C			
Firm/Company				
11767 South Dixi	e Huy #134			
Miami, FL 33 City/State and Zip Code	156			
Is to be used for future annual report notification)				
For further information concerning this matter, please call:				
Toutha Tennings Name of Person	at (305) 66 > 9286 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:				
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			

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:

1.	Name of the limited liability company:	HONIZON Key LLC	
2.	(a) Principal office address of limited lia (Note: MUST BE STREET ADDR		₹Ĺ
	(b) Mailing address of limited liability of (Note: MAY BE POST OFFICE I		
	7/22/2013	L13000103619 3	
3.	Date of filing/registration in Florida	4. Document number	
5.	(a) Registered Agent and Registered Of	fice shown on the records of the Florida Dept. of State	
	Registered Agent:	Premier Tax & Accounting	
	Registered Office Address:	Thomas R. Hellery 3002 Anglan Park EBNC #200 Orland FL 32828	:2
	(b) Enter name of NEW Registered Ag	ent and/or NEW Registered Office address:	
	NEW Registered Agent:	Tourthan S. Tennings	

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.

Missimi

FL **33156**

Signature of a fnember or authorized representative of a member

Tonethan S' Tennings

(MUST BE FLORIDA STREET ADDRESS)

NEW Registered Office Address:

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 of Registered Agent

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