L13000121882

| (Re | equestor's Name) | |
|---|--------------------|-----------------|
| (Ac | ldress) | |
| (Ac | ldress) | |
| (Ci | ty/State/Zip/Phone | = #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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09/24/14--01008--024 **35.00

11/17/14--01042--002 **20.00

SECRETARY OF STATE

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(10 11.18,14

COVER LETTER

| TO: Registration Section Division of Corporations | şe. |
|---|-----|
| SUBJECT: Trish Pub Club, 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: | |
| Barbara Carpenter Name of Person | |
| Trish Pub Club, LLC Firm/Company | |
| 18750 SW 77th Place Road Address | |
| Dunnellon FL 34432 City/State and Zip Code | |
| City/State and Zip Code barbara @ irishpub Club. Org or barbara@ irishpub Club. E-mail address: (to be used for future annual report notification) | ne |
| For further information concerning this matter, please call: | |
| Barbara Carpenter at (334) 806-9584 Name of Person 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: | |
| 1 \$25 Filing Fee \$\$ \$55 Filing Fee & Certified Copy (See Letter) 1 \$35 Previously Alent (See Letter) 4 \$20 Inclosed | |
| INHS18 (2/14) \$35 Premovely | |
| Thankun! \$20 enclosed | |



October 2, 2014

BARBARA CARPENTER IRISH PUB CLUB, LLC 18750 SW 77TH PLACE ROAD DUNNELLON, FL 34432

SUBJECT: IRISH PUB CLUB, LLC Ref. Number: L13000121882

We have received your document for IRISH PUB CLUB, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

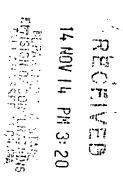
Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 814A00021116



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of section's 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. Name of the limited liability company: Knnellon, FL (b) 18750 Principal office address of limited liability company: 34432 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) (Note: MUST BE STREET ADDRESS) 132 3. 5. (a) United States Corporation 13302 Winding Oak Court (MUST BE FLORIDA STREET ADDRESS) Registered Office Address 33612 **NEW** Registered Office Address: 3*443*2 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 or authorized representative of a member 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 605, F.S. Or, if this document is being filed to merely reflect a chapte in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. gnature of Registered Agent