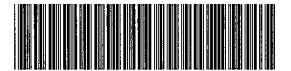
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(Requestor's Name)					
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PICK-UP	☐ WAIT	MAIL			
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K. SALY EXAMINER DEC 1 2 2013

COVER LETTER

Division of Corporations					
SUBJECT: Raging Goat 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:					
Richard Terrell					
Name of Person					
Raging Goat LLC					
Firm/Company					
37 N Orange Ave Ste 910E					
Address	······································				
Orlando, FL 32801					
City/State and Zip Code					
RagingGoatLLC@gmail.com					
E-mail address: (to be used for future annual report no					
For further information concerning this matter	r, please call:				
Richard Terrell	at (801) 706-9842				
Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS:	MAILING ADDRESS:				
Registration Section Division of Corporations	Registration Section Division of Corporations				
Clifton Building	P.O. Box 6327				
2661 Executive Center Circle Tallahassee, Florida 32301	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.	Nar	ne of the limited liability company: Raging Goat LLC		
2.	(a)	Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	760	<u> </u>
			Orlando, FL 32801	<u> </u>
(b)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	37 N Orange Ave	
		(Noie. MAT BETOST OFFICE BOX)	Orlando, FL 32801	
				- 100. F.
No	v 6, 20	013	L13000155951	9/7/8
_			4. Document number	· Sm
5.	(a)	Registered Agent and Registered Office shown on t	he records of the Florida Dep	t. of State:
		Registered Agent:	NORTHWEST REGISTERED AGENT, LLC	
		Registered Office Address:	3030 N. ROCKY POINT DR. STE 150A	
		Registered Office Address,	TAMPA, FL 33607	
	(0)	Enter name of NEW Registered Agent and/or NEW NEW Registered Agent:	- Registered Office address	
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	37 N Orange Ave Ste 910E	
		[MUST BE FLURIDA STREET ADDRESS]	Orlando	,FL32801
an lia the	nfirr d the bilit e me e ope	imited liability company is not organized under the land that after the change or changes are made, the Flee business office of the registered agent will be identify company, it is hereby confirmed that the change(s) mbers of the limited liability company or as otherwise rating agreement of the limited liability company.	orida street address of the reg	is hereby istered office
	hard T		_	
Pr	inted o	or typed name of signee		
I i co an Ci ad	herei mply d I a japte dres	by accept the appointment as registered agent and as with the provisions of all statutes relative to the pro m familiar with and accept the obligations of my pos er 608, F.S. Or, if this document is being filed to men s, I hereby confirm that the limited liability company	gree to act in this capacity. I per and complete performani lition as registered agent as p ely reflect a change in the re has been notified in writing i	further agree to be of my duties, provided for in gistered office of this change.

Signature of Registered Agent