Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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LLC REGISTERED AGENT CHANGE LAKE DORA ELECTRONICS, LLC

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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.

Name of the limited liability company: Lake Dora Electronics, LLC							
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<u></u> - '	,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		3545 Cactus Lane, Mount Dora, FL 32757			3545 (Cactus Lane, Mount Dora, FL 32757	
		December 2, 2013		L	.13000	167019	
3.		Date of filing/registration in Florida	4.			Document number	
5.	(a)	Registered Agent and Registered Office shown on the records of the James E.L. Seay Registered Office Address (MUST BE FLORIDA STREET A			Dopt. of S	tate:	
c/o Holland & Knight LLP, 200 South Orange Avenue							
		Suite 2600, Orlando	3280	1			
	(b)	(b)Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>			ress:		
		Sarah Seay					
		NEW Registered Office Address:				ت الله الله الله الله الله الله الله الل	
		5707 Bear Lake Circle	· · · · · · · · · · · · · · · · · · ·			<u> </u>	
		Apopka , FL	3270	3			
the age was the state of the to a not	s cha ent w s/we arti signat herel ovisi e obli- mere tifled	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia tre authorized by an affirmative vote of the members of clos of organization or the operating agreement of the law of a member of a member of a member of a member of a statutes relative to the proper and complete in the statutes relative to the proper and complete in the registered agent as provided by reflect a change in the registered office address, I have the proper and this change.	es of the the reg bility of the li limited	e S gist con mit l lis	ered off npany, i led liabi ability c	ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany. Printed or typed name of signee	
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00							

INHS18 (2/14)