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2016 MAR - T P W 52

MAR 0 8 2016 O. BRUCE Registration Section
Division of Corporations

TO:

SUBJECT: Spring Green LC 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:
Paul Jones Name of Person
Spring Green Firm/Company
3425 Backspin Ln Address
City/State and Zip Code
Spring Green PCo @ notrail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Paul Jones at 321, 278-0692 55 Name of Person Area Code & Daytime Telephone Number 55
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Cloft Executive Center Circle MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

Tallahassee, Florida 32301

\$25 Filing Fee

Enclosed is a check for the following amount:

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.

l. Na	Name of the limited liability company: Spring Green Cu			
2. (a)	(a) 3425 Backspin In (b) Spring G	reer \$125 Backsoin In		
	Principal office address of limited liability company:	address of limited liability company:		
	(Note: MUST BE STREET ADDRESS) (Note:	MAY BE POST OFFICE BOX)		
	Orlando, Fl 32804 Orland	0, Fl. 32804		
3.	Date of filing/registration in Florida 4. Documents of the property of the pr	0006557		
5. (a)				
Registered Agent and Registered Office shown on the records of the Florida Bept, of State:				
13302 Winding Oak Ct. A				
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	-tama []			
	- Janya, FL	Ā.co. ≥		
	.FL 336/2	ALE SEC		
(b)	(b) Paul Jones	ASS.		
(-)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	SS -		
	2/12 ~ 0 /			
	3425 Backspin in	1, 0.		
	NEW Registered Office Address:	A STATE OF		
	Orlanda El	>		
	- Trances fit.			
	279x4			
•	,FL			
the cha agent v was/we	the limited liability company is not organized under the laws of the State of Florida, is e change or changes are made, the Florida street address of the registered office and the twill be identical. Or, in the case of a Florida limited liability company, it is herebas/were authorized by an affirmative vote of the members of the limited liability company.	ne business office of the registered by confirmed that the change(s) nany or as otherwise provided in		
Signa	Signature of a member or authorized representative of a member Printed	or typed name of signee		
I here provisi the oblic to mere notified	hereby accept the appointment as registered agent and agree to act in this capacity. ovisions of all statutes relative to the proper and complete performance of my duties, e obligations of my position as registered agent as provided for in Chapter 605, F.S. merely reflect a change in the registered office address, I hereby confirm that the limotified in writing of this change.	I further agree to comply with the		