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## COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	Clark Customs LLC		
	1	Name of Limited L	Liability Company
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered	Office Change and	d fee(s) are submitted for filing.
Please	return all correspondence concerning	g this matter to the	following:
Amand	a J. Cisne McCrory		
	Name of Person		<del>_</del>
McCro	ry Law Firm		
	Firm/Company	· · · · · · · · · · · · · · · · · · ·	<del>_</del>
309 Tai	niami Trail		
	Address		<del></del>
Punta C	Gorda, FL 33950		
	City/State and Zip Cod	le	<del></del>
annualf	iling@mccorylaw.com		
E	-mail address: (to be used for future	annual report noti	fication)
For fun	ther information concerning this mat	ter, please call:	
Jenny C	C. Hazel	941 at (	208-2122
	Name of Person	a.( <u>_</u>	Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the follow	ing amount:	
	□ \$25 Filing Fee	<b>□</b> \$	55 Filing Fee & Certified Copy
INHS18	(2/14)		

## 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.

Na	ame of the limited liability company: Clark Customs L		
(a)	137 Graham Street SE	(b) <u>137 Gra</u>	tham Street SE
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Port Charlotte, FL 33952	Port Cha	arlotte, FL 33952
	01/16/2014	1.1400000	08839
	Date of filing/registration in Florida	4.	Document number
(a)	Law Office of Eric C. Fleming, PA		
(41)	Registered Agent and Registered Office shown on the records of	f the Florida Dept. of S	itate:
	5011 Ocean Blvd, 205		
	Registered Office Address (MUST BE FLORIDA STREET	'ADDRESS)	<del>_</del>
			2023 SEC TALL
	Sasrasota	, 34242	_ ··· • • • • • • • • • • • • • • • • •
	, F1	l	
(b)	McCrory Law Firm, PL		Sign
,,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office address:	AH II:
	200 T T 1		
	309 Tamiami Trail		
	NEW Registered Office Address:		
	Punta Gorda	33950	_
	Filma Corosa	L	<u> </u>
mge	imited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. (17), in the case of a Florida limited li	e registered office a	and the business office of the registered
s/we	ere authorized by an aftermative vote of the members cles of organization of the operating agreement of the	of the limited liabi	lity company or as otherwise provided i
Z		Zachary Clark	, -
igual	ure of a member or authorized representative of a member		Printed or typed name of signee
ovisio v obli merc	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ily reflect a change in the registered office address. I I in writing of this change.	ree to act in this co performance of m ed for in Chapter 6 hereby confirm the	apacity. I further agree to comply with the distinct of the following and I am familiar with and account of the following file of the limited liability company has been at the limited liability company has been

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25,00