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DIVISION OF CORFORMING

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COVER LETTER

	gistration Section vision of Corporations				
SUBJECT	Stag Horn Thoroughbreds,	LLC			
Боворог		ne of Limited Lial	pility Company		
Dear Sir or	Madam:				
The enclose	ed Registered Agent/Registered Off	fice Change and fe	ee(s) are submitted for filing.		
Please retur	rn all correspondence concerning th	is matter to the fo	llowing:		
Christine	Marie Gaisunas				
······	Name of Person		-		
	Firm/Company		-		
15709 N\	W 112 AVENUE				
	Address		_		
REDDIC	K, FLORIDA 32686		_		
	City/State and Zip Code				
gaisunas	hj@yahoo.com				
E-mai	il address: (to be used for future and	nual report notific	ation)		
For further	information concerning this matter	, please call:			
Heather (Gaisunas	352 at (351-4463		
	Name of Person		Area Code & Daytime Telephone Number		
Rep Div Cli 266	REET/COURIER ADDRESS: gistration Section vision of Corporations fton Building 61 Executive Center Circle tlahassee, Florida 32301	Regi Divi P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 shassee, Florida 32314		
Enclosed is a check for the following amount:					
	\$25 Filing Fee	□ \$55	Filing Fee & Certified Copy		
INHS18 (2/1	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.

1.	Na	me of the limited liability company: Stag Horn The	orough	bre	eds	, L	_C	
2.	(a)	Christine Gaisunas	(b) (Chri	sti	пе	Gaisunas
-,	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 15709 NW 112 AVE	_	-	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 15709 NW 112 AVE			
		REDDICK, FL 32686	_	_				K, FL 32686
			_	Ť	<u></u>			1000021433
3.		Date of filing/registration in Florida	4.				I	Document number
5.	(a)	INCORP SERVICES, INC						
		Registered Agent and Registered Office shown on the records of t 17888 67th COURT NORTH	he Florida	ı De	pt. o	f St	ate:	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					_	
		LOXAHATCHEE, FL	33470				_	SECA DIVISION
	(b)	CHRISTINE GAISUNAS						FEB -9
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				Conroll 9 PH		
		15709 NW 112 AVE						- 23
		NEW Registered Office Address:					_	26 26
			1241					
		REDDICK ,FL	32686					
the ag	e cha ent v as/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the reginability confirmation of the limited l	ste om nite lial	red opany d lia pility	offi y, it abil y co	ce is ity	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
-	Signa	ture of a member or authorized representative of a member	•					Printed or typed name of signee
the to	ovisi e obl mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I do no writing of this change.	ee to act perform d for in (hereby c	t in an Chi onj	this ce o apté irm	s ca f m r 60 tha	pac v di 05, u th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
X 451	gnatu	re of Registered Agent						