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AND ADARSES, FLORIDA

APR 0.2 2014

C. CARROTHERS

COVER LETTER

	istration Section sion of Corporations	
SUBJECT:	PREPHARD LLC	
	Name of Limite	d Liability Company
Dear Sir or I	Madam:	
The enclosed	d Registered Agent/Registered Office Change	and fee(s) are submitted for filing.
Please return	all correspondence concerning this matter to	the following:
	Name of Person	
PR	EPHORD LLC Firm/Company	
6350	Palm Trace Landings Drive Address	Apt 303
Davie	City/State and Zip Code	
PRe E-mail	Dhapd 954 @gmail Cov address: (to be used for future annual report n	otification)
For further i	information concerning this matter, please call	3
	Name of Person at (95	Area Code & Daytime Telephone Number
Reg Div Clif 266	REET/COURIER ADDRESS: cistration Section ision of Corporations fron Building 1 Executive Center Circle lahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

2 \$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.

1. Na	ame of the limited liability company: PREPHARD L	.LC	_	· .			
2. (a)	6350 PALM TRACE LANDINGS DR. 303	(b)	6350 PALM	TRACE LANDIN	NGS DR.	303	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	DAVIE, FL 33314		DAVIE, FL 3	3314			
_	02/12/2014		L1400002441				
3.	Date of filing/registration in Florida	4.	Doo	cument number			
5. (a)	UNITED STATES CORPORATION AGENTS, II	NC.					
	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State:				
	13302 Winding Oak Court						
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS	2				
					E 192	15	
	Tampa, FI	L3	3612			MAR	→ ~
(b)	InCorp Services, Inc.				第30mm	MAR 30 PM 12: 4	FILEO
	Enter name of NEW Registered Agent and/or NEW Registered	d Office ad	<u>dress</u> :			孟	
	17888 67th Court North				OR DE	8 h : 2	
	NEW Registered Office Address:				3.7		
	Leveletebee	3	3470				
	Loxahatchee F	L	3470				
the ch agent was/v	limited liability company is not organized under the la nange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited la were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the regi- liability co of the lim	stered office an ompany, it is he nited liability co liability compa	ereby confirmed the company or as other	hat the characteristics of the characteristic	ange(s	ierea i)
-,	nature of a member or authorized representative of a member			• •			
the of	eby accept the appointment as registered agent and as sions of all statutes relative to the proper and complet bligations of my position as registered agent as provid rely reflect a change in the registered office address, l ed in writing of this change.	zree to ac e perform led for in I hereby c	t in this capacit nance of my dut Chapter 605, F confirm that the	ty. I further agree ies, and I am fam .S. Or, if this doc limited liability o	e to comp iliar with cument is company f	ly with and a being nas bei	n the ccep filed en
1/1	Natalie Bales on b	ehalf of i	incorp Service	es, Inc.			