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Registration Section

TO:

Divi	sion of Corporations				
CUD IECT.	BJECT: LH Thermostat Systems, LLC Name of Limited Liability Company				
SUBJEC1:					
Dear Sir or M	Madam:				
The enclosed	d Registered Agent/Registered Off	fice Change and fee	e(s) are submitted for filing.		
Please return	all correspondence concerning th	is matter to the fol	lowing:		
Derek Hev	witt				
	Name of Person				
LH Therm	ostat Systems, LLC				
	Firm/Company				
478 E Alta	monte Dr. #108				
	Address				
Altamonte	Springs, Fl. 32701				
	City/State and Zip Code				
dhewitt@li	ht-stats.com				
E-mail	address: (to be used for future and	nual report notifica	tion)		
For further in	nformation concerning this matter	, please call:			
Derek Hev	vitt	407 at (592-3646		
	Name of Person		Area Code & Daytime Telephone Number		
Regi Divi Clift 2661	EET/COURIER ADDRESS: istration Section sion of Corporations on Building Executive Center Circle ahassee, Florida 32301	Regis Divis P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 hassee, Florida 32314		
Encl	losed is a check for the following	g amount:			
\$ 2	25 Filing Fee	2 \$55	Filing Fee & Certified Copy		
INHS18 (2/14	1)				

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.

	ame of the limited liability company: LH Thermosta		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	478 E Altamonte Dr. #108,	SAM	
	Altamonte Springs, Fl. 32701		
	2/27/2014	L 140	00033978
 (a) 	Borok LAW Grup, A. David Borack	4.	Document number
,	Registered Agent and Registered Office shown on the records of t	the Florida Dept. of	State:
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	25
	130 Crown Oak Centre Drive,		
	Longwood	32750	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Derek Hewitt	Office address:	
	NEW Registered Office Address:		
	478 E Altamonte Dr. #108		
	Altamonte Springs , FL	32701	
the cm	imited liability company is not organized under the law ange 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 o icles of organization of the operating agreement of the	the registered o	office and the business office of the registered, it is hereby confirmed that the change(s) bility company or as otherwise provided in company.
Signs	ture of a member or authorized representative of a member		Printed or typed name of signee
here provis he ob- to mer	by accept the depointment as registered agent and agri- ions of all starties relative to the proper and complete ligations of the position as registered agent as provided ely reflect achange in the registered affice address, I had in writing of this charge.	ee to act in this performance of d for in Chapter hereby confirm	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed that the limited liability company has been