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SECRETARY OF STATE
TALLAHASSEE, FI

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COVER LETTER

Division of Corporations							
HRSNED IRA, LLC SUBJECT:							
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Office	Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this m	natter to the following:						
Nancy E. Dinkel							
Name of Person							
HRSNED IRA, LLC							
Firm/Company							
1772 Lee Janzen Drive							
Address							
Kissimmee, FL 34744							
City/State and Zip Code							
asknandinkel@gmail.com							
E-mail address: (to be used for future annual	report notification)						
For further information concerning this matter, ple	ase call:						
Nancy E. Dinkel	954 588-5588						
Name of Person	Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, Florida 32314						
Enclosed is a check for the following am	ount:						
\$25 Filing Fee	□ \$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.

1. Na	ame of the limited liability company: HRSNED IRA	, LLC			
2. (a)	HRSNED IRA, LLC	-	HRSNE	D IRA, LLC	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	\	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	1772 Lee Janzen Drive		1772 Le	e Janzen Drive	
	Kissimmee, FL 34744	_	Kissimm	ee, FL 34744	
	04/14/2014		L1400006	60912	
3.	Date of filing/registration in Florida	4.	···	Document number	
5. (a)	Nancy E. Dinkel				
). (u)	Registered Agent and Registered Office shown on the records of HRSNED IRA, LLC	the Floric	la Dept. of State	»:	
	Registered Office Address (MUST BE FLORIDA STREET. 400 S. 57 TERRACE	<u>ADDRES</u>	<u>s)</u>	20 SE	
	HOLLYWOOD , FL	33023	}	7AL	
(b)	Nancy E. Dinkel Enter name of NEW Registered Agent and/or NEW Registered Office address:			2019 NOV 25 AM 7: SECRETARY OF ST TALLAHASSEE, I	
	HRSNED IRA, LLC		<u> </u>	M J: 56 AN OF STATE ASSEE, FL	
	NEW Registered Office Address:			- · m or	
	1772 Lee Janzen Drive				
	Kissimmee, FL	34744			
the cha agent v was/wo the arti	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited libere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the laying the control of a member of authorized representative of a member	the regability confithe line of the line o	istered office company, it is nited liability	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany. kel	
				Printed or typed name of signee	
provisi the obli to mere	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I din writing of this change.	perform	nance of my i	duties, and I am familiar with and accept	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent