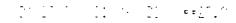


(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only







COVER LETTER

Runion Holdings, LLC SUBJECT:			
	mited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Cha	inge and fee(s) are submitted for filing.		
Please return all correspondence concerning this matte	er to the following:		
Gavin Magaziner, Esq.			
Name of Person			
Magaziner Law, P.A.			
Firm/Company			
204 9th Ave. S.			
Address	 ;		
Safety Harbor, FL 34695			
City/State and Zip Code			
rsbuildersllc@yahoo.com	1.		
E-mail address: (to be used for future annual rep	ort notification)		
For further information concerning this matter, please	call:		
	727 900-7557		
Name of Person	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 following amount	nt:		
■ \$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.

2. (a)	36600 Blanton Rd.	(b)	36600 Blanton Rd.				
. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	Dade City, FL 33523		Dade City.	, FL 33523			
	04/16/2014	1.	.140000620	057			
	Date of filing/registration in Florida	4.	_ · · -	Document nu	mber		_
. (a)	Roger G. Runion						
(4)	Registered Agent and Registered Office shown on the records o	f the Florida I	Dept. of State	e:			
	37837 Meridian Ave.			_			
	Registered Office Address Suite 312 (MUST BE FLORIDA STREET)	ADDRESS)			. <u>:</u> 		
	Dade City	33525		-		- '	
(b)	Magaziner Law, P.A. Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office add	<u></u>	-	: :- :	F. 1: 5]	•
	204 9th Ave. S.				,		
	NEW Registered Office Address:			_			
	Safety Harbor , F	L_ ³⁴⁶⁹⁵		-			
nange gent v as/wo ie arti	imited liability company is not organized under the later or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited level authorized by an affirmative vote of the members cles of organization or the operating agreement of the Patricials.	e registered iability com of the limit	office and	d the business s hereby confi y company or	office of the of the of the office of the of	he regis he chan	tered ge(s)
Poger R	<u> </u>	Roger	Runion				
_	ture of a member or authorized representative of a member			Printed or types	_		
I herei provisi the obl to mere	ture of a member of authorized representative of a member by accept the appointment as registered agent and agions of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I din writing of this change.	o nerforma	ice of my i	acity. I furthe	r agree to e m familiar	comply with an	d m

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Signature of Registered Agent