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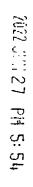
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PICK-UP	MAIT	MAIL		
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COVER LETTER

TO: Registration Section Division of Corporations		
CKE Enterprise LLC SUBJECT:		
	Name of Limited Li	ability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.
Please return all correspondence concerning	ig this matter to the f	following:
Evelyn Hefner		
Name of Person		
Evelyn Hefner		
Firm/Company		
1565 Jason street		
Address		_
Kissimmee ,Florida 34744		
City/State and Zip Co	de	_
evehefner@yahoo.com		
E-mail address: (to be used for future	annual report notifi	cation)
For further information concerning this ma	itter, please call:	
Evelyn Hefner	407 at (5091517
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 follow	wing amount:	
☐ \$25 Filing Fee	08 \$5	5 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. N	ame of the limited liability company: CKE Enterprise	LLC		
2. (a)		í	b)	
2. (d)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1565 Jason Street		PO Box 70	52291
	Kissimmee, Florida 34744		Saint Clou	nd Florida 34770
	04/21/2014		L140000649	210
3.	Date of filing/registration in Florida	4.		Document number
5. (a))	of the Floric	la Dent of Stat	
	R&H Tax Solutions inc	, are i rome	n Dept. of San	
	Registered Office Address (MUST BE FLORIDA STREET	TANDER	<u> </u>	_
	4913 East Colonial Drive	I ADDKES	<u>.37</u>	
	4715 Last Colonial Diffe			- 20
	Orlando , F	L 32803		2022.
				- C
(b)			<u> </u>	27
	Enter name of NEW Registered Agent and/or NEW Registered	ed Office a	<u>ddress</u> :	TO Est
	Product II de ou			
	Evelyn Hefner	_		–
	NEW Registered Office Address:			-
	1565 Jason street			_
	Kissimmee	34744		
	I	`L		_
chang agent was/w	limited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited larger authorized by an affirmative vote of the members icles of organization or the operating agreement of the members are the control of the members.	ie register liability co of the lir e limited	ed office an ompany, it i nited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
Sign	nture of a member or authorized representative of a member			Printed or typed name of signee
provis the ob to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and completed ligations of my position as registered agent as provided with the reflect a change in the registered office address, and in writing of this change.	gree to ac e perform ed for in Thereby c	t in this cap nance of my Chapter 603 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Signate	are of Registered Agent			