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COVER LETTER

TO: Registration Section

INHS18 (2/14)

Divi	sion of Corporations					
SUBJECT:	Tomboholla Consulting, LLC					
Sebster.	Name of Limited Liability Company					
Dear Sir or N	∕ladam:					
The enclosed	l Registered Agent/Registered Offi	ce Change and fe	ee(s) are submitted for filing.			
Please return	all correspondence concerning thi	s matter to the fo	llowing:			
Kevin J. B	arnes		•			
	Name of Person		-			
Tomboholl	la Consulting, LLC					
	Firm/Company		-			
8389 SW 9	Snapdragon Ct					
	Address		-			
Stuart, FL	. 34997					
	City/State and Zip Code		_			
kjrbarnes2	@gmail.com					
E-mail	address: (to be used for future ann	ual report notification	ation)			
For further in	nformation concerning this matter,	please call:				
Kevin J. Ba	arnes	609 at (408-0478			
	Name of Person		Area Code & Daytime Telephone Number			
Regi Divis Clift 2661	stration Section sion of Corporations on Building Executive Center Circle shassee, Florida 32301	Regi Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 shassee, Florida 32314			
Encl	osed is a check for the following	amount:				
☑ \$2	25 Filing Fee	□ \$55	Filing Fee & Certified Copy			

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	me of the limited liability company: Tomboholla Co	onsulti	ng, LLC		
2	(a)	Tomboholla Consulting, LLC	(b	Tomboh	olla Consulting, LLC	
2. (u)		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0,		Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		8389 SW Snapdragon Ct		8389 SW	V Snapdragon Ct	
		Stuart, FL 34997	_	Stuart, F	FL 34997	_
		June 11, 2014		L1400009	93756	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	Company Service Corporation				
٥.	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State		Dept. of State	::	
		Elizabeth A. Smith				
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
		1201 Hays Street				
		Tallahassee , FL	32301		2015	
	(b)	Tomboholla Consulting, LLC			JUL 2	T
	(-)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				
		Kevin J. Barnes			Ö	
		NEW Registered Office Address:			: 5 4	
		8389 SW Snapdragon Ct			-	
		Stuart , FL 3	34997			
the ag	e cha ent v is/we	mited liability company is not organized under the laws inge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regis pility co the lim mited li	tered office mpany, it is ited liability	and the business office of the registers hereby confirmed that the change(s) company or as otherwise provided in apany.	
_	Signat	ure of a member or authorized representative of a member			Printed or typed name of signee	—
pro the to no	ovisi e obl mere tified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he I in writing of this change.	e to act erforma for in C ereby co	in this capa ince of my a hapter 605, infirm that t	ncity. I further agree to comply with th luties, and I am familiar with and acce , F.S. Or, if this document is being file the limited liability company has been	ie Ppt Pd
Si	gnatu	e of Registered Agent				