L14000158081

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(Add	ress)			
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16 MAR 24 AM 8: 44

MAR 2 5 2016 Y SULKER CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

REFERENCE : 075555

AUTHORIZATION : Spellice Man

COST LIMIT : \$ 55.00

ORDER DATE: March 23, 2016

ORDER TIME : 9:03 AM

ORDER NO. : 075555-005

CUSTOMER NO: 4369500

CHANGE OF AGENT

NAME: STINGINN, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY _____ PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

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: STINGINN. LLC				
2.	(a)	8598 SW 168th TR	_ (b)	8598 SW 168th TR		
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- \-/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		Palmetto Bay, FL 33157	_	Palmetto Bay, FL 33157		
			-			
_		October 1, 2014		L14000158081		
3.		Date of filing/registration in Florida	4.	Document number		
5.	(a)	Glen N. Barber, PhD				
		egistered Agent and Registered Office shown on the records of the Florida Dept. of State:				
		8598 SW 168th TR				
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
		·				
		Palmetto Bay , FL	33157			
((b)	Corporation Service Company		MAR 24 AM 8: 44		
		Enter name of NEW Registered Agent and/or NEW Registered Office address:				
		1201 Hays Street		0 0 -		
		NEW Registered Office Address:		AM 8: 44		
		Tallahassee, FL_	32301			
the ag	e cha ent v is/we	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabore authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regist bility cou the limi	tered office and the business office of the registered mpany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in		
		Glen Erber	Glen	N. Barber, PhD		
	Signat	ture of a member or authorized representative of a member		Printed or typed name of signee		
pro the to	ovisi e obl mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ly reflect a change in the registered office address, I he I in writing of thir change.	e to act erforma for in C ereby co	nce of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed nfirm that the limited liability company has been		
	,			Courtney Williams		
Si	gnatu	re of Registered Agent Corporation Service Company	BY:	Asst. Vice President		