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Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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08/19/15--01029--005 **25.00





2804 Gateway Oaks Drive #200 Sacramento, CA 95833

Phone (800)533-7272 Fax (800)603-5868

REFERENCE # MUST BE ON INVOICE TO BE PAID

NUMBER PAGES:

Date: August 13, 2015

AE: Chris Mannix

TO:

Registration Section Division of

REFERENCE:

NCE: 907342

Corporations

CLIFTON BUILDING

2661 EXECUTIVE CENTER CIRCLE

TALLAHASSEE, FL 32301

FAX:

PLEASE PERFORM THE FOLLOWING:

RED CARDINAL INVESTMENTS, LLC

Change of Registered Agent

IN: FL

SPECIAL INSTRUCTIONS: Please file the attached. If you have any questions regarding this filing, please contact me at 888-418-8862 or cmannix@myparacorp.com.

H1039

Thank you,

Chris Mannix

Enclosed: Check # 7097 \$25.00 PLEASE RETURN: Regular Mail

PLEASE CALL (800)533-7272 ATTN: Chris Mannix TO CONFIRM FILING RESULTS

RETURN TO: PARASEC - 2804 GATEWAY OAKS DRIVE #200 SACRAMENTO, CA 95833

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET (800)533-7272

COVER LETTER

Registration Section TO: Division of Corporations RED CARDINAL INVESTMENTS, LLC SUBJECT: Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Chris Mannix Name of Person Paracorp Incorporated Firm/Company 2804 Gateway Oaks Dr #200 Address Sacramento, CA 95833 City/State and Zip Code annualreports@myparacorp.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Chris Mannix Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: ☑ \$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. N	ame of the limited liability company: RED CARDIN	AL INVESTMENT	rs, llc
2. (a)	4651 BABCOCK ST NE STE 18-350	(b) 4651 BABCOCK ST NE STE 18-350	
<i>2.</i> (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	M	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	PALM BAY, FL 32905	PALM BA	Y, FL 32905
	10/14/2014	L14000159	9860
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Sharon Cooke		
()	Registered Agent and Registered Office shown on the records of the	ne Florida Dept. of State:	
	155 OFFICE PLAZA DRIVE 1ST FLOOR		
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	
			2015 SEC TALL
	TALLAHASSEE , FL	32301	
			ا المناب المحتمرين
(b)	Paracorp Incorporated		24.50 E
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	
	155 OFFICE PLAZA DRIVE 1ST FLOOR		\$2 : \$2 : \$2 :
	NEW Registered Office Address:		7
	TALLAHARREE	22204	
	TALLAHASSEE , FL	32301	
the cha agent v was/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of a will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the I	the registered office a bility company, it is the limited liability imited liability comp	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
Sion	dure of member or authorized representative of a member	Gary Browne	Printed or typed name of signee
I here provis the ob- to men notifie	by accept the appointment as registered agent and agre- lights of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change.	te to act in this capac performance of my di for in Chapter 605, ereby confirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed be limited liability company has been