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SECRETARY OF STATE ALLAHASSEE, FLORIDA

FEB 2.4 2015 T. CARTER

COVER LETTER

SUBJECT: MOWER'E MORE - Change of Office address
Name of Limited Liability Company

Registration Section

Division of Corporations

TO:

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:		
FRANCIS J LONGEN Name of Person		
MOWER & MORE Firm/Company		
378 Northlake Blud		
N. Palm Bch Fla 33408 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
FPANCIS J. LONGEN at (561) 352-4334 Name of Person Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section 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 & 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. Name of the limited liability company: NowER 2. (a) ____ Principal office address of limited liability company: Mailing address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX) 2015 .5000002 3. Date of filing/registration in Florida Document number 5. (a) 3 FRANCIS J LONGEN Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 378 NORTHLAKE BLUD 212 NRalmBch 33408 (MUST BE FLORIDA STREET ADDRESS) (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: SOUARE **NEW** Registered Office Address: ALM BEACH GARDENSEL 33418 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent