LISCOCIAHTI

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SECRETARY OF STATE

HOY OF TOIS HARINCE

COVER LETTER

	egistration Section bivision of Corporations				
SUBJEC		T :::4- A T :	ability Company		
	Name of I	Limitea Li	ability Company		
Dear Sir o	or Madam:				
The enclo	sed Registered Agent/Registered Office C	hange and	fee(s) are submitted for filing.		
Please ret	turn all correspondence concerning this ma	tter to the	following:		
Cynthia	Shea				
	·				
	Name of Person				
Sunbelt	Endeavors, LLC				
	Firm/Company	<u> </u>	_		
104 Sea	a Fem Dr.			7 c 22	
	Address			2015 NOV -5 SECRETARY	
				NOV -5 F	
Leesbu	rg, FL 34788			-5 -5	Sanda (
•	City/State and Zip Code				_ : ·
cindy30	0s@yahoo.com			A II: 03	_
E-m	nail address: (to be used for future annual re	eport notif	ication)	₽m 33	
For furthe	er information concerning this matter, pleas	se call:	<u>:</u>		
Cynthia	Shoa	.352	508-5100		
	at)	hana Niverban	
	Name of Person	t	Area Code & Daytime Telepl	ione Number	
	TREET/COURIER ADDRESS:	_	AILING ADDRESS:		
	Registration Section Division of Corporations	,	gistration Section vision of Corporations		
	Clifton Building		O. Box 6327		
	661 Executive Center Circle		llahassee, Florida 32314		
Т	allahassee, Florida 32301				
E	Enclosed is a check for the following amo	unt:			
Q	3 \$25 Filing Fee	□ \$:	55 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.	Na	me of the limited liability company:	Sunbelt Ende	avors,	LLC					
2	(a)	10601 US Highway 441 C-18		n	106	601 US	S Highwa	ay 441	C-18	
<i>4</i>	(u) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)						
		Leesburg, FL 34788		_	Lee	esburg,	, FL 347	88	<u>-</u>	
		January 27, 2015		_	L150	000020	0471			
3.		Date of filing/registration in	Florida	4.			Document:	number		
5.	(a)	Darryl L. Snyder								
		Registered Agent and Registered Office show Registered Agent	n on the records of	the Florid	n Dept.	of State:				
		Registered Office Address (MUST BE F) 104 Sea Fern Dr.	LORIDA STREET	ADDRES	<u>5)</u>					
		Leesburg	FI	34788						
	(b)	Cynthia G. Shea						SECRE)	2015 NOV	'n
		Enter name of NEW Repistered Agent and/o	H IVEW RESISTER	Ome m	IUI CSS.			RETARY OF AHASSEE.	2-2	
		NEW Registered Office Address:						E 6	A #:	
		104 Sea Fem Dr.							.0	
		Leesburg	, FI	34788				<i>جر</i>	ω	
the agree was	cha ent w is/we enti	imited liability company is not organi- inge or changes are made, the Florida vill be identical. Or, in the case of a Jare authorized by an affirmative vote cles of organization or the opportuning a time of a member of authorized representative	street address of florida limited li of the members of agreement of the	the reginability coof the limited	stered ompan nited li liabilit rryl L	office and office of the state	and the but hereby concompany of sany. Printed or type of the sand or type of the san	siness on infirmed or as other ped name	ffice of that the erwise of signe	f the registered e change(s) e provided in
pre the to no	ovisi obli mere tifice	by accept the appointment as register ons of all statutes relative to the propigations of my position as registered of the registered of the registered of a registered of the registered of Registered Agent	er ana complete	noriorn	mnro i	of moved	utios and	i /1100 1/110	11 i / ir v	ui lh <i>and acco</i>nt