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## COVER LETTER

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TO: Registration Section	า			
Division of Corpora	ations			
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	600 1	EARDEN ENTERPRISES, LLC		
SUBJECT:	yecker &	PARDEN UNTERPRIGES, LLC		
	Name of Lir	mited Liability Company		
Dear Sir or Madam:				
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i ne enciosed Registered Ag	gent/Registered Office Chai	nge and fee(s) are submitted for filing.		
Please return all correspond	lence concerning this matte	r to the following:		
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Name of Pe	erson	Area Code & Daytime Telephone Number		
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<del>-</del>	Registration Section Registration Section Division of Corporations Division of Corporations			
Clifton Building	ations	P.O. Box 6327		
2661 Executive Ce	nter Circle	Tallahassee, Florida 32314		
	Tallahassee, Florida 32301			
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Enclosed is a chec	k for the following amour	ıt:		
. /	J			
\$25 Filing Fee		□ \$55 Filing Fee & Certified Copy		
INHS18 (2/14)				
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## 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. SECRET GARDEN ENTERPRISES LCC Name of the limited liability company: 2. (a) 2655 N. OCEAN DR (b) Mailing address of limited liability company: Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX) 415000027621 3. Document number WARDDAMON BUSINESS SERVICES, WC Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 4420 BRACON CIRCLE Enter name of NEW Registered Agent and/or NEW Registered Office address: 5 N. OCEAN DR # 203  $FL_{\underline{}}$ 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. Printed or typed name of signee Signature of a member of 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 chapte in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. Signature of Registered Agen

> Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (2/14)