1150000 88633

(Re	questor's Name)		_
(Add	dress)		_
(Add	dress)		_
(6)	(Chata Fin (Dhana	40	_
(Cir	y/State/Zip/Phone	#)	
PICK-UP	. WAIT	MAIL	
(Bu	siness Entity Name	е)	_
(Do	cument Number)		-
Certified Copies	_ Certificates o	of Status	-
Special Instructions to	Filing Officer		$\neg \mid$
Special instructions to t	Filing Officer.		

Office Use Only



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16 APR -1 PM 3: 26
SECRETARY OF STATE
TALL & MASSES FLORIDA

APR 05 2016 J. HARRIS

COVER LETTER -

TO: Registration Section Division of Corporations	
SUBJECT: Get In and Hold On LLC Name of Lin	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	
Thomas J. Brady Name of Person	<u> </u>
GET IN AND HOLD ON Firm/Company	•
8419 RIVEY PRESERVE D	<u>riué</u>
Bradenton, FL 3421 City/State and Zip Code	<u>.7</u>
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please of	call:
Tom Brady at (Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amoun	t:

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

☑ \$25 Filing Fee

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.

I. Na	me of the limited liability company: Get In and Hole	d On LLC	C				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (b)	841	Mailing address of lin	nited liabil	ity comp	pany:
	Bradenton, Florida 37212	_	34	et voba	1 T		onda
	05/19/2015	ļ	L1500008	8633			
3.	Date of filing/registration in Florida	- 4	*	Document numb	er		
e ()	BUSINESS FILINGS INCORPORATED						
5. (a)	Registered Agent and Registered Office shown on the records of t	the Florida	Dept. of State	- 6:			
	1200 South Pine Island Road		•				
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS))	-			
			•				
	Plantation, FL	33	324	.	SECRI	16 APR	- THE STATE OF THE
(b)	InCorp Services, Inc.			_		1	squarens squarens
• ,	Enter name of NEW Registered Agent and/or NEW Registered	Office add	res:		\$\frac{2}{7}0	P	771
	17888 67th Court North			_	F STATE , FLORID	¥ 3: 2	Ö
	NEW Registered Office Address:				DAI P	9	
				-			
	Loxahatchee , FL	<u>. 33</u>	1470	_			
the cha agent v	imited liability company is not organized under the law inge or changes are made, the Florida street address of 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	the regise the contract the con	tered office mpany, it is ited liabilit	e and the business s hereby confirme y company or as o	office o	of the rate of the character of the char	egistered ige(s)
Signat	ture of a member or authorized representative of a member			Printed or typed na	me of sign	« /	4 ·
provisi the obl to mere	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I is different for this change. Some Braufigery on behalf of Incorp	perjorma d for in C hereby co U	ince of my hapter 605 infirm that	acity. I further a duties, and I am j b, F.S. Or. if this the limited liabili	gree to c amiliar documen ity compo	omply with ar nt is be any ha	with the nd accept ing filed s been
Signatu	ire of Registered Agent						