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MAR 14 2017 S. YOUNG

TALLAHASSEL FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: AARDVARK LINITED WA, LLC 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:			
BRUCE C. HAYHOE			
Name of Person			
Firm/Company			
3339 BOCA CIEGA DA			
Address			
NAPUSS. FL 34112			
City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
BRUCE HAVINGE at (715) 202 - 3868			
Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother 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 amount:			
\$25 Filing Fee			
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. N	Name of the limited liability company:	ARK LI	INITED USA, LLC
2. (a)	22.23 23 . 2 . 4 . 20		3339 BUCA CIEGA DA
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(5)-	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	NAPLES, FL 34112		NAMES, FL 34112
	JANUARY 21, 3016		
	by belowning.		L16000014669
3.	Date of filing/registration in Florida	4.	Document number
5. (a) CHEYENNE MOGELEY, LEGALZO		
	Registered Agent and Registered Office shown on the records		ept. of State:
	Registered Office Address MUST BE FLORIDA STREE	H	
		T ADDRESS)	
	TEMPH		
	TAMPA	FL 2361	3 章
(b)	Enter name of NEW Registered Agent and/or NEW Register		·
	Enter name of NEW Registered Agent and/or NEW Register	rea Onice abort	ess.
	Bruce C. HayHoE		
	NEW Registered Office Address:		4 5 5
	3339 BICH CIEGA DIL		
		FL 34118	Z
	,	FL	<u>·</u>
the chagent was/v	limited liability company is not organized under the nange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the second or the control of the second or the control of the second or the operating agreement of the second or the operating agreement of the second or the second or the operating agreement of the second or	of the registe l liability comes s of the limite he limited lia	ared office and the business office of the registered apany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in bility company.
Sign	Pource Co, Harrige nature of a member or authorized representative of a member	4	British or typed name of signee
I her	ehy accent the appointment as registered agent and i	noree to act is	this canacity. I further garee to comply with the
provi. the ol to me	sions of all statutes relative to the proper and comple bligations of my position as registered agent as provi rely reflect a change in the registered office address, ed inwriting of this change.	ele performan ded for in Ch I hereby con	ce of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been
Signa	ture of Registered Agent		