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(Reque	stor's Name)					
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PICK-UP	WAIT	MAIL				
(Busine	ess Entity Name	e)				
(Document Number)						
Certified Copies	Certificates of	of Status				
Special Instructions to Filia	ng Officer:					

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THE RESERVE FLORIDE SECRETARY OF STATE

S Warren

AUG 1 6 2016

COVER LETTER

TO:	Registration Section Division of Corporations		*
SUBJI	Top Brand Holdings LLC		
	Nam	e of Limited I.	iability Company
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered Offi	ice Change and	I fee(s) are submitted for filing.
Please	return all correspondence concerning the	is matter to the	following:
Keith	Brand		
	Name of Person		
Тор Е	Brand Holdings, LLC		
	Firm/Company		<u> </u>
8695	Watercrest Circle West		
	Address		******
Parkla	and, FL 33076		
	City/State and Zip Code	1	
	②topbrandht.com		
E	-mail address: (to be used for future ann	ual report noti:	fication)
For fur	ther information concerning this matter,	please call:	
Keith	Brand	954 at (247-4074
_	Name of Person		Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:	M	AILING ADDRESS:
	Registration Section	Re	egistration Section
	Division of Corporations		vision of Corporations
	Clifton Building		O. Box 6327
	2661 Executive Center Circle	Та	Illahassee, Florida 32314
	Tallahassee, Florida 32301		
	Enclosed is a check for the following	amount:	
	■ \$25 Filing Fee	□ \$:	55 Filing Fee & Certified Copy

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	ame of the limited liability company: Top Brand Hol	dings	, LLC					
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 8695 Watercrest Circle West	_ (b)	G.	iling address o Note: MAYB ercrest Cir	E POST	OFFICE	- •
	Parkland, FL 33076	_	Parl	kland,	FL 33076			
	2/25/16		L160	00039	274			
3.	Date of filing/registration in Florida	4.		D	ocument nu	mber	······································	
5. (a)	Registered Agent and Registered Office shown on the records of the Business Filings Incorporated Registered Office Address (MUST BE FLORIDA STREET A) 1200 South Pine Island Road			of State:				
	Plantation , FL3	33324	.		. •	- 4		
(b)	Enter name of NEW Registered Agent and/or NEW Registered Communication NEW Registered Office Address: 8695 Watercrest Circle West	Office a	ddress:		ECRETARY OF STATE LAHASSET, FLORIDA.	2116 PG IS P 3: 39		
	Parkland ,FL3	33076	6		•			
the cha agent was/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the limited liabers.	he reg bility of the linited	istered compan mited li	office a y, it is h ability o y compa	nd the busir tereby confi- company or	ness of rmed t	fice of the hat the ch	e registered ange(s)
Signa	ture of a member of authorized representative of a member			P	rinted or types	name o	of signee	
provis the ob- to mer notifie	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	ee to ac perform for in ereby	ct in thi nance o Chapte confirm	is capac of my du er 605, l that the	ity. I furthe ties, and I a F.S. Or, if ti e limited lia	r agree m fam his doc bility c	e to comp iliar with cument is company i	ly with the and accept being filed has been
	Division of Corporations P.O. B	ox 632	7• Tal	lahasse	e, FL 32314	4		

FILING FEE: \$25.00