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COVER LETTER

TO: Registration Section Division of Corporations						
ssk holdings llc						
Nan	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.					
Please return all correspondence concerning th	nis matter to the following:					
stephen p kramer						
Name of Person						
ssk holdings lic						
Firm/Company						
2726 knoll street east						
Address						
palm harbor, fl 34683						
City/State and Zip Code						
sheilakramer59@yahoo.com						
E-mail address: (to be used for future ann	nual report notification)					
For further information concerning this matter.	, please call:					
sheila m kramer	727 410-1930					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS:	MAILING ADDRESS:					
Registration Section	Registration Section					
Division of Corporations	Division of Corporations					
Clifton Building	P.O. Box 6327					
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314					
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.

i. Na	me of the limited liability company:SK	Ho	din	35	UC			
2. (a)	2726 Knoll St. E.	_ (b)	27	26+	mo.	11 5	t.8	Ξ,
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		М	ailing address (<u>Note: MAY</u>				
	Palm Harbor, FL		Pa	Int			7	
	34683					340	28	3
	Feb. 25, 2016		L 14	0000	043	355	55	
3.	Date of filing/registration in Florida	4.	1	Document n	umber			
5. (a)	Shela M. Kramer	n Eleminia 1	Nest of States					
	2726 Knoll St. E		ept. of State:					
	Registered Office Address (MUST BE FLORIDA STREET AL	ODRESS)						
	Palm Harbor, FL	34	68=	3		圣 经	18 FE	أمضا
(b)	Stephen P. Krar	ne	Y				813	
	Enter name of NEW Registered Agent and/or NEW Registered O	ffice addr	<u>ess</u> :			+ 4 + -	PH	
	2726 Knoll St. E.	•				74 P	?	
	NEW Registered Office Address:					3.	<u>0</u>	
	Palm Harbor .FL	34	168	3				
If the li	mited liability company is not organized under the laws	of the S	tate of Flor	ida, it is her	eby confi	rmed tha	at after	
the cha	nge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liab	he registe	ered office :	and the busi	ness offic	e of the	registe	ered
was/wy	re authorized by an affirmative vote of the members of	the limit	ed liability	company or	as others	wise pro	vided i	n

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 change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Division of Corporations P.O. Box 6327 Taliahassee, FL 32314