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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

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## COVER LETTER

TO: Registration Section Division of Corporations	•			
SUBJECT: <u>ENVIRONMENTAL</u> Name of Limite	ASSURANCE HERITAGE, LL ed 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:				
ELIZABETH A. HULDE Name of Person	R_			
Firm/Company				
7175 VICTORIA CIRCLE Address				
UNIVERSITY PARK, FL City/State and Zip Code	34201			
EHULDER & AOL · COM  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
ELIZABETH A HUDER at ( 9	141 ) 320 - 2372 Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a cheek for the following amount.				

☐ \$55 Filing Fee & Certified Copy

\$\$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.

1.	Na	une of the limited liability company: <u>ENVIRONMENTAL</u> ASSURANCE HERITAGE LLC
2.	(a)	PRINCIPAL ADDRESS: (b) MAILING ADDRESS:  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  (Note: MAY BE POST OFFICE BOX)
		7175 VICTORIA CIRCLE 7175 VICTORIA CIRCLE
		UNIVERSITY PARK, FL 34201 UNIVERSITY PARK, FL 34201
3.		OH / 26 / 2016         L 1 60000 8 14 36           Date of filing/registration in Florida         4.         Document number
5.	(a)	HULDER, ELIZABETH A — REGISTERED AGENT Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
		HULDER, ELIZABETHA.  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
		4772 RINGWOOD MEADOW
		SARASOTA PL 34235
	(b)	Enter name of New Registered Agent and/or NEW Registered Office address:
		SAME OF W
		HULDER, ELIZABETHA
		NEW Registered Office Address:  7175 VICTORIA CIRCLE
		UNIVERSITY PARK FL 34201
the age was	cha nt w /we	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after nge or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an aftirmative vote of the members of the limited liability company or as otherwise provided in cles of organization or the operating agreement of the limited liability company.
-\$	<u>unal</u>	Wro of a member of authorized representative of a member ELIZABETH A. HULDER  Printed or typed name of signee
pro the to n	vish obli tere	or accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the fons of all statutes relative to the proper and complete performance of my duties, and I am Jamiliar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed live reflect a change in the registered office address. I hereby confirm that the limited liability company has been I in writing of this change.
Sig	natur	re of Registered Agent
		Division of Cornerations P.O. Roy 6327 Tallabasson, FL 3231.4

**FILING FEE: \$25.00**