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SECRETARY OF STATE ALLAHASSEE, FLORIDA FILED

O BRUCE JUN 05 2017

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: High Class Long Name of Limit	auns LLC ited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter	to the following:	
Michael Ponton Name of Person High Class Launs LL	·	
Firm/Company		
19415 Bexley Rd Address		
land Olakes FL 346 City/State and Zip Code		
Mign Class Jawns Email - (a) E-mail address: (to be used for future annual report	T notification)	
For further information concerning this matter, please ca	P IN	
Michael Ponton at (S		
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 amount	:	
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

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.

Pioriaa.
1. Name of the limited liability company: High Class Launs, LC
2. (a) 19615 Bexley Rd (b)
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
19615 Bexten Rd 191015 Berlin Rd
land o'lakes, FL 34638 land o' lakes, FL 3463
3. Date of filing/registration in Florida 4. Document number
S. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
FL Mited States Corporation agent Inc.
13302 winding oak Cout to tampa FL 33612
SECOND COLOR
(b) Mi Chael Contact and/or NEW Registered Office address:
SSR - 2
19415 Bexies Rd
NEW Registered Office Address:
Igna o Ignes
, FL 34638
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
Michael Roman Signature of a member or authorized representative of a member Printed or typed name of signee
· · · · · · · · · · · · · · · · · · ·
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 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent