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INHS18 (2/14)

TO: Registration Section Division of Corporations
SUBJECT: Fishing with the Fox, 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:
Richard T. Fox Jr. Name of Person
Fishing with the Fox LLC Firm/Company
4700 Santa del Pae Ave Address
Fort Myers FL 33901 City/State and Zip Code
Fishingwith the fox amail. com E-mail address: (to be used for Juture annual report notification)
For further information concerning this matter, please call:
Richard Fx at (239) 464 - 2000 Name of Person Area Code & Daytime Telephone Number
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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BULIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liabilisability submits the following statement in order to change its registered office or registered agent, or both, in Florida.

1107144.					
1. Name of the limite	d liability company: <u>Fi</u>	shing With	the	tox, LLC	
2. (a) 4700 Sar	-1-1- 2	_		Santa d Mailing address of lim	
-	ffice address of limited liability :: MUST BE STREET ADDR	• •	r	Maining address of fill (<u>Note: MAY BE P</u> C)	•
Fort My	lers , FC 33901	· · · · · · · · · · · · · · · · · · ·	Fort	Myers, FC	33901
10/6/2	O(b f filing/registration in Flor		1600	0018601	
3. Date of	filing/registration in Flor	rida 4.		Document number	er
5. (a) United S	States Compora	tion Agents	, Inc.	-	
-	and Registered Office shown on	_	Dept. of State	*'	
5575 Registered Office	S. Semoran Address (MUST BE FLORI	BV d DA STREET ADDRESS)	 	-	
Suite 3		DI GIRLLI I I I DENGO			2019 SEP 16
	•		- 0	•) SEI
orland	0	FL_ 3.2.8 2	22	-	916
(b) Richard	1 For				79
	W Registered Agent and/or NE	W Registered Office add	ress:		
4700 NEW Registered C	Santa del R	Cae Ave			TEN C
- Acgistered	Jine radiess.			-	
Fort M	yers	. FL <u>339</u> 0	51	-	
If the limited liability c	ompany is not organized	under the laws of the S	State of Flo	orida, it is hereby	confirmed that
agent will be identical.	are made, the Florida stree Or, in the case of a Flori	da limited liability cor	npany, it is	s hereby confirme	d that the char
	y an affirmative vote of th tion or the operating agree				therwise provi
	ノーブ			Printed or typed nar	
	authorized representative of a r				
I hereby accept the approvisions of all statute the obligations of my poto merely reflect a characteristic in writing of the	pointment as registered a es relative to the proper a osition as registered agen nge in the registered offici us change.	gent and agree to act i nd complete performa it as provided for in Ci e address, I hereby coi	in this cap nce of my hapter 605 nfirm that	acitv. I further as duties, and I am fo f, F.S. Or, if this o the limited liabili	gree to comply amiliar with ar document is be ty company ha:
Signature of Registered Age	ent				