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(Re	equestor's Name)			
(Ac	ldress)			
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(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	TIAW	MAIL		
(Business Entity Name)				
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COVER LETTER

Division of Corporations		
Maddcock Holdings, L.L.C.		
	mited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Teresa Cockrum		
Name of Person		
Maddcock Holdings L.L.C.		
Firm/Company		
1303 Fortune Ave		
Address		
Panama City, Florida 32401		
City/State and Zip Code	 _	
sntcobank@aol.com		
E-mail address: (to be used for future annual rep	ort notification)	
For further information concerning this matter, please	call:	
Teresa Cockrum 2	248 762-5980	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amour	nt:	
☑ \$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.

Name of the limited liability company: Maddcoo	ck Holdings, L.L	.C	
a) 1303 Fortune Ave, Panama City, FL 324	401 (b) 13	303 Fortune Ave,	Panama City, FL 3240
Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)		-	of limited liability company: BE POST OFFICE BOX)
April 08, 2019	 L16	000221920	
Date of filing/registration in Florida	4.	Document n	umber
(a) Cockrum, Teresa			
Registered Agent and Registered Office shown on the reco	ords of the Florida Dep	t. of State:	
Registered Office Address (MUST BE FLORIDA STI 11483 Front Beach Rd Tower 1-1206	REET ADDRESS)		
Panama City Beach	, FL 32407		101
b) Cockrum, Teresa			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Reg</u>	istered Office address	:	PH SI
NEW Registered Office Address:			1 TE
1303 Fortune Ave			Ŝ.
Panama City	FL_32401		
ne limited liability company is not organized under the change or changes are made, the Florida street address will be identical. Or, in the case of a Florida limity were authorized by an affirmative vote of the membarticles of organization or the operating agreement or the operating agreem	ess of the registere ited liability compa ibers of the limited of the limited liabil	d office and the busi my, it is hereby conf liability company or lity company.	ness office of the registered irmed that the change(s) as otherwise provided in
gnature of a member or authorized representative of a member	Ter	CS 9 Coc Printed or type	Krum

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.

Signature of Registered Agent