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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for future
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## LLC REGISTERED AGENT CHANGE MISH HOLDINGS, LLC

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## 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	me of the limited liability company: MISH HC	DLDINGS, I	LLC	
2. (a)	709 CAPE CORAL PARKWAY W	(b) 709 C	(b) 709 CAPE CORAL PARKWAY W	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ``	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	CAPE CORAL, FL 33914	CAPE C	CORAL, FL 33914	
	07/28/2017	L17000	161436	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	RON ST.CLAIR			
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of Sta	te:	
	709 CAPE CORAL PARKWAY W			
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	_	
		33914	_	
(b)	Registered Agents Inc.  Enter name of NEW Registered Agent and/or NEW Registered	LOSSes uddenses		
	Effect flame of NEW Registered Agent and/of NEW Registered	Conice address.	21	
	7901 4th St N		APR TI	
	NEW Registered Office Address:		R 27	
	STE 300			
	St. Petersburg	33702	Figure 4	
the cha agent v was/we	imited liability company is not organized under the lainge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	f the registered offic ability company, it of the limited liabili	te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in	
Signa	ture of a member or authorized representative of a member	Tiley Faik	Printed or typed name of signee	
provisi the obl to merc notified	by accept the appointment as registered agent and agents of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I fin writing of this change.  Bill Havre - Assistar of Registered Agent	ree to act in this cap a performance of my ad for in Chapter 60 hereby confirm that nt Secretary	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	