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TO:	Registration Section
	Division of Corporations

Action	Holdings	LLC

SUBJECT:	<u> </u>	
Nam	e of Limite	d Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offi	ce Change	and fee(s) are submitted for filing.
Please return all correspondence concerning thi	s matter to	the following:
Andrew Gilliland		
Name of Person		
Action Holdings LLC		
Firm/Company		
107 N 11th Street #446		
Address		
Tampa FL 33602		
City/State and Zip Code		<del></del>
andrew@actionholdings.com		
E-mail address: (to be used for future annu	ual report n	otification)
For further information concerning this matter,	please call	
Andrew Gilliland	813	400-9335
Name of Person	at (	Area Code & Daytime Telephone Number
Name of Felson		The Gode to Saytime Telephone (Value)
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	
Tallahassee, Florida 32301		rananassee, morida 32314
Enclosed is a check for the following	amount:	
■ \$25 Filing Fee	C	\$55 Filing Fee & Certified Copy
INTEREST (2/14)		

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.

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