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AUG 15 2018 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: PRESSURE	TOINT, LLC ame of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
CHOIS HANKS Name of Person	
CAD MEDIA HOLDA	WAS LIC
126 E. Olympia Ave	= +304
PUNTA GORDA, FL City/State and Zip Code	33950
WEWASH941@GMAIL E-mail address: (to be used for future a	nnual report notification)
For further information concerning this matter	er, please call:
CHRIS HANKS	at (941) 323-3131
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clitton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following	ng 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. Name of the limited liability company; Principal office address of limited liability company; Mailing address of limited liability company; MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX) 3. Date of filing/registration in Florida Registered Agent and Registered Office shown on the records of the Florida Dept. of State: ᇚ Enter name of <u>NEW Registered Agent</u> and or <u>NEW Registered Office address:</u>

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.

Signature of a member or authorized representative of a member

At 1215 | Harv | LS

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. Thereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent