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C. GOLDEN

## **COVER LETTER**

TO: Registration Section Division of Corporations		
Float & Flourish, LLC		
	Name of Limited Li	ability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to the	following:
Laura Pentel-Klang		
Name of Person	<u> </u>	_
Matthews & Jones, LLP		
Firm/Company		_
4475 Legendary Drive		
Address		_
Destin, FL 32541		
City/State and Zip Coo	ie	<del>_</del>
lbolton@destinlaw.com		
E-mail address: (to be used for future	annual report notif	ication)
For further information concerning this mat	tter, please call;	
Lisa Bolton	850 at (	837-3662
Name of Person	\	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the follow	ving 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.

Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  1 Myers, Fl. 33908  1 Myers, Fl. 33908  Date of filing/registration in Florida  ence R. Berlage stered Agent and Registered Office shown on the records of the 182 Quail Run Drive  istered Office Address (MUST BE FLORIDA STREET ADDRESS)  ( Myers , FL 3	L.1 4. e Florida D	Fort Myers 80001320	Document n	BE POST	OFFICE	
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r name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office addr	ess:	_	· ·	۲: 5	Ş
5 Legendary Drive		_	<u>-</u>		10	
<u>V</u> Registered Office Address:						
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tool Hinsling	Michael John Hineline					
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	Registered Office Address:  d liability company is not organized under the law nanges are made, the Florida street address of the recidentical. Or, in the case of a Florida limited liability in the identical of the members of organization or the operating agreement of the liability of a member or authorized representative of a member of all statutes relative to the proper and complete poins of my position as registered agent as provided flect a change in the registered office address. The	d liability company is not organized under the laws of the Stanges are made, the Florida street address of the registered e identical. Or, in the case of a Florida limited liability companized by an affirmative vote of the members of the limited forganization or the operating agreement of the limited liability companies of the limited liability of a member or authorized representative of a member	d liability company is not organized under the laws of the State of Floringes are made, the Florida street address of the registered office are identical. Or, in the case of a Florida limited liability company, it is uthorized by an affirmative vote of the members of the limited liability of organization or the operating agreement of the limited liability corporation of the operating agreement of the limited liability corporation of the appointment as registered agent and agree to act in this cape of all statutes relative to the proper and complete performance of my ons of my position as registered agent as provided for in Chapter 60, flect a change in the registered office address, I hereby confirm that	d liability company is not organized under the laws of the State of Florida, it is he hanges are made, the Florida street address of the registered office and the busines e identical. Or, in the case of a Florida limited liability company, it is hereby contathorized by an affirmative vote of the members of the limited liability company of organization or the operating agreement of the limited liability company.  Michael John Hineline  The amember of authorized representative of a member  Printed or type of a statutes relative to the proper and complete performance of my duties, and I all statutes relative to the proper and complete performance of my duties, and I all statutes relative to the proper and complete performance of my duties, and I all statutes relative to the proper and complete performance of my duties, and I all statutes relative to the proper and complete performance of my duties, and I all statutes relative to the proper and complete performance of my duties, and I all statutes relative to the proper and complete performance of my duties, and I all statutes relative to the proper and complete performance of my duties, and I all statutes relative to the proper and complete performance of my duties, and I all statutes relative to the proper and complete performance of my duties, and I all statutes relative to the proper and complete performance of my duties, and I all statutes relative to the proper and complete performance of my duties.	d liability company is not organized under the laws of the State of Florida, it is hereby companyes are made, the Florida street address of the registered office and the business office identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the original properties of the limited liability company or as other organization or the operating agreement of the limited liability company.  Michael John Hineline  The appointment as registered agent and agree to act in this capacity. I further agree	d liability company is not organized under the laws of the State of Florida, it is hereby confirmed nanges are made, the Florida street address of the registered office and the business office of the registerial. Or, in the case of a Florida limited liability company, it is hereby confirmed that the cathorized by an affirmative vote of the members of the limited liability company or as otherwise performance of my duties, and I am familiar with one of all statutes relative to the proper and complete performance of my duties, and I am familiar with one of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is flect a change in the registered office address, I hereby confirm that the limited liability company

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Laura W. Pentel-Klang
Signature of Registered Agent