## 11800143029

(R	equestor's Name)			
(Address)				
(Address)				
(C	city/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



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## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJE	HOGFISH SPECIALTIES LL	.C	
		e of Limited	Liability Company
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered Offi	ce Change an	d fee(s) are submitted for filing.
Please	return all correspondence concerning thi	s matter to th	e following:
sco	TT QUENRUD		
	Name of Person		
HOG	FISH SPECIALTIES LLC		
	Firm/Company		
699 6	S1 STREET - APT A		
	Address		<del></del>
MAR	ATHON, FL 33050		
-	City/State and Zip Code		
skirtis	s2011@gmail.com		
E	-mail address: (to be used for future annual	ual report not	ification)
For fur	ther information concerning this matter,	please call:	
Scott	Quenrud	305	407-5596
	Name of Person		Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	R E P	AAILING ADDRESS: Registration Section Division of Corporations O. Box 6327 Callahassee, Florida 32314
	Enclosed is a check for the following	amount:	
	<b>□</b> \$25 Filing Fee	<b>-</b> :	\$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.

		(h			
. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	699 61 Street - Apt A		699 61 Street - Apt A		
	Marathon FL 33050		Marathon FL 33050		
	06/11/2018		L18000143029		
	Date of filing/registration in Florida	4.	Document number		
(a)	United States Corp Agents Inc.				
(α)	Registered Agent and Registered Office shown on the records	of the Florida	Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS			
	13302 Winding Oak Court		18		
	Tampa	FL 33612	SEP		
	Scott Quenrud		20 M		
(b)	Enter name of NEW Registered Agent and/or NEW Registe	red Office add	Iress:		
			P 20 MH H: 31		
	NEW Registered Office Address:				
	699 61 Street - Apt A				
	Marathon	FL_33050			
e cha ent v as/w	imited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the street in the case of the street and the case of the member icles of organization or the operating agreement of the case of the street and the case of the street and the case of the street and the case of	laws of the of the regis I liability co	tered office and the business office of the register impany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in		
	lar -		tt Quenrud		
	gnature of a member or authorized representative of a member		Printed or typed name of signee		
1	ture of a member or authorized representative of a member		Printed or typed name of signee		