## Clorida Department of State

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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

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Email Address:\_\_\_\_\_

## LLC REGISTERED AGENT CHANGE HEUSS ENTERPRISES, 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.

. (a)	7901 4th St N		(b) 14260 W. Newberry Road	
()	Principal office address of limited liability company	:	Mailing address of limited liability comp (Note: MAY BE POST OFFICE BO.	
	(Note: MUST BE STREET ADDRESS) STE 300		Suite #208	Ŋ
		-		
	St. Petersburg FL 33702		Newberry Florida 32669	
	08/27/18		L18000204305	
	Date of filing/registration in Florida	4.	Document number	
(a)	MICHAEL R HEUSS			
5. (a)	Registered Agent and Registered Office shown on the record	ls of the Flo	rida Dept. of State:	
	14260 W. Newberry Road			
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRE	ESS)	
	Suite #208			
	Newberry	<sub>. FL</sub> 326	669	
			,	
(h)	Registered Agents Inc.		<b>%</b> _1	
(b)			<b>%</b> _1	
(b)	Registered Agents Inc.		SELACE TALLAHA	اند
(b)	Registered Agents Inc.  Enter name of NEW Registered Agent and/or NEW Registered Agent		SELAL AND FALLAHASSEE	71.4
(b)	Registered Agents Inc.  Enter name of NEW Registered Agent and/or NEW Registered Agent Age		SELACE TALLAHA	FILED

the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Bill Havre

Riley Park

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, I hereby confirm that the limited liability company has been notified in writing of this change.

Assistant Secretary

Signature of Registered Agent