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COVER LETTER

Name of Limited Liability Company

Registration Section Division of Corporations

House of Wilds, LLC

TO:

Dear Sir or Madam:								
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.								
Please return all correspondence concerning this matter to the following:								
Payton Rodnaur Name of Person House of Wilds, LLC Firm/Company 187 Pardom Cemetery Rd Address								
PIEW ON FL 32/80 City/State and Zip Code								
RP. ROLYIQUEZISONA HOU. MM E-mail address: To be used for thiure annual report notif	cation)							
For further information concerning this matter, please call:								
Dayton Radingul at (727) Name of Person	709-1970 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 following amount:								
\$25 Filing Fee S:	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.

	ume of the limited liability company: Howe sf	Mal A	f ll	\mathcal{C}			
1. Na 2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) PICYSON, TV 32180	(b)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Thurdon illing address of lim (Note: MAY BE PO	ited liabil		any: J
3. 5. (a)	Date of filing/registration in Florida ZEN BUSINESS, INC Registered Agent and Registered Office shown on the records of the Shift F. College, Ave. Ste	4.	D	00048731 Occument numbe	ℓ \		
(b)	Registered Office Address MUST BE FLORIDA STREET A. Tallahassel . FL	33 Bi			; ·	LuzuHAY 3	y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Payton Rodngulz NEW Registered Office Address: 187 PWd om Cemetery	rd.			· .	API Chapter	Ü
change agent v was/we the arti Signa I here	imited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liabore authorized by an affirmative vote of the members of organization or the operating agreement of the liability of a member of a listantic declarive to the proper and complete in	registered o pility compa the limited imited liabi	te of Flori office and the any, it is head to the any, it is head to the any of the angle of the	the business offinereby confirmed company or as of any. Printed or typed namity. I further against the sand I am Id	ce of the d that the therwise . July the of signe of signe will are to committed to the committee to committee the committee to committee the committee to committee the committee to committee the committe	e registe change provide provi	ered ge(s) ded in
notifice V	igations of my position as registered agent as provided by reflect a change in the registered office address, I he f in writing of this change. When the change is the change is the change is the change in the change is the ch	ereby confu	em that the	e limited liability	v compai	ny has	been