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(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(В	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:

700237665727

07/25/12--01004--003 **55.00

SECHCIARY OF STATE

A. LUNT

JUL 2 5 2011

EXAMINER

Office Use Only

COVER LETTER

Division of Corporat	ions						
SUBJECT:				gers, L ty Compa			
Dear Sir or Madam:							
The enclosed Registered Ag	ent/Registered	Office (Change	and fee(s)	are submit	tted for filing	
Please return all corresponde	ence concerning	g this m	atter to	the follow	ving:	SECSE SECSE	2017 JUL 25
William M Name o	1. Holland, Jr. of Person			_		HASSEE, PLOF	E 25 PH 7 16
Firm/C	ompany			_			9
1725 E.	8th Avenue			_			
	ida 33605-381 and Zip Code	11		_			
williamholla E-mail address: (to be used for				_			
William M. Holla	-	at (813)	988-	9894	

STREET/COURIER ADDRESS:

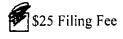
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Name of Person

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:





\$55 Filing Fee & Certified Copy

Area Code & Daytime Telephone Number

TO:

Registration Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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:	Ft. Chaffee Ranger	s, LLC				
2. (a) Principal office address of limited liability comp	oany: 2123 N.E. C	oachman Rd. Ste A				
(Note: MUST BE STREET ADDRESS)	Clearwater, Florida 3	33765				
(b) Mailing address of limited liability company:	2123 N.E. Co	achman Rd. Ste A				
(Note: MAY BE POST OFFICE BOX)	Clearwater, Florida 3	33765				
09/28/2011	M110000	0048965				
3. Date of filing/registration in Florida	4. Document number					
5. (a) Registered Agent and Registered Office shown	on the records of the Florid	a Degizof Sare:				
Registered Agent:	Thomas C. Little	25 3 W				
Registered Office Address:	2123 N.E. Coachmar Clearwater, Florida 3	n Rapette A 3785 6				
NEW Registered Agent: NEW Registered Office Address:	William M. Holland, Jr. 1725 E. 8th Avenue					
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1725 E. 8th Avenue	1725 E. 8th Avenue				
	Tampa	,FL <u>33605</u>				
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be id liability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	e Florida street address of the lentical. Or, in the case of a e(s) was/were authorized by	he registered office Florida limited				
Thomas C. Little						
Printed or typed name of signee						
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 508, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this capace proper and complete perfor position as registered agen merely reflect a change in t any has been notified in wr	ity. I further agree to rmance of my duties, it as provided for in he registered office iting of this change.				
Signature of Registered Agent						

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