Division of Corporations

DIRECTOR'S OFFICE

Florida Department of State

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LLC REGISTERED AGENT CHANGE S&S FAMILY HOLDINGS, LLC

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Corporate Filing Menu

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JAN 05 2015

T. CARTER

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Fox Audit: His 00000051 0 3 STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114. 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.

1. Name of the limited liability company. 5&S Family Hold	lings, LLC		
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y.50-20 Ireland Street Century Fasteners Corp Elmhurst, New York 11373		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	50-20 Ireland Street Century Fasteners Corp Elmburst, New York 11373		
12/27/2013	M13000008119		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on		귥	TALL
Registered Agent:	CT Corporation System	N N	**E
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324	70	TARY ASSE
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address: Business Filings Incorporated	44 10: 21	OF STATE
NEW Registered Agent: NEW Registered Office Address:	515 E. Park Avenue		>
<u>MUST BE FLORIDA STREET ADDRESSI</u>	Tallahassec ,FL 32301		
If the limited liability company is not organized under the confirmed that after the change or changes are made, the I and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s the members of the limited liability company or as otherw the operating agreement of the limited liability company.	Florida street address of the registered offic tical. Or, in the case of a Florida limited i) was/were authorized by an affirmative v	ote of	

Signature of a member or authorized rescumive of a member

Evan Stieglitz, Manager

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to get 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 vosition 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.

Mark Williams, AVP, Business Filings Incorporated Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (12/13)

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