

M14000008430

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

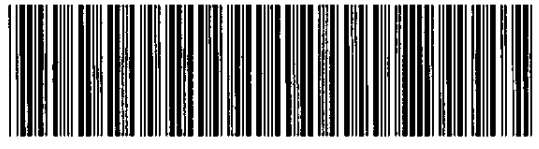
(Business Entity Name)

(Document Number)

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15 AUG 21 PM 12:59
DEPT OF STATE
TALLAHASSEE, FLORIDA

AUG 25 2015
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Heights Equity Delaware, LLC

Name of Limited Liability Company

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:

Joseph Borchers

Name of Person

Firm/Company

19309 Pier Point Court

Address

Lutz, FL 33558-9711

City/State and Zip Code

joeborchers@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph Borchers 813 961-6400

Name of Person at () _____
Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

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

Enclosed is a check for the following amount:

- \$25 Filing Fee \$55 Filing Fee & Certified Copy

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.

1. Name of the limited liability company: Heights Equity Delaware, LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

3. 11/21/2014 Date of filing/registration in Florida 4. M14000008430 Document number

5. (a) Corporation Service Company
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1201 Hays Street
Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

Tallahassee, FL 32301

FILED
15 AUG 21 PM 12:59
TALLAHASSEE, FLORIDA

(b) Joseph Borchers
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

19309 Pier Point Ct
NEW Registered Office Address:

Lutz, FL 33558

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

JOSEPH H. BORCHERS
Printed or typed name of signer

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.

[Signature]
Signature of Registered Agent

BY: JOSEPH H. BORCHERS