M15000009082

(Requestor's Name)				
(Address)				
(A ₀	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
,				

Office Use Only



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09/27/16--01040--024 **25.00

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S. HARRIS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: September 23, 2016

Order#: 295115-004

Re: HORIZONS HOLDINGS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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.

1. N	ame of the limited liability company: HORI	ZONS HOLDINGS,	LLC
2. (a)	1705 S WAUKEGAN ROAD Principal office address of limited liability co	• •	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	(INIC. MOST BE STARRET TO DAKES	<u>. </u>	(MAL MAT BETOST OF THE BOX)
	WAUKEGAN IL 600	85	
	11/12/2015		M1500009082
3.	Date of filing/registration in Florid	la 4.	Document number
5. (a)			
	Registered Agent and Registered Office shown on the	e records of the Florida I	Dept. of State:
	1200 SOUTH PINE ISLAND RD		
	Registered Office Address (MUST BE FLORIDA	A STREET ADDRESS)	
			ක් දි
	PLANTATION	, FL <u>33324</u>	
4.5	Company Source Company		
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW	Registered Office addr	ress:
			₩
	1201 Hays Street		53 53
	NEW Registered Office Address:		
	Tallahassee	,FL 32301	
	Tallatiassee	, FL32301	
the cha agent was/w	ange or changes are made, the Florida street a will be identical. Or, in the case of a Florida	address of the registe limited liability con members of the limit tent of the limited lia	State of Florida, it is hereby confirmed that after tered office and the business office of the register mpany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in ability company. ilmi, Authorized Person
Signa	ature of a member or authorized representative of a mer	nber	Printed or typed name of signee
provis the ob to mer notifie	ions of all statutes relative to the proper and ligations of my position as registered agent of the registered office a clin writing of this change.	complete performai is provided for in Cl address, I hereby cor	in this capacity. I further agree to comply with the new of my duties, and I am familiar with and acceptable to 5, F.S. Or, if this document is being fillenfirm that the limited liability company has been
OIEHAU	are of Registered Agent Corporation Service Co	ompany bi; Gra	ace E. Kirby, Asst. Vice President

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