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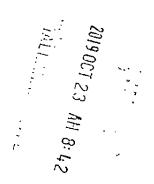
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Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Holihan Ventures. Name of Corpo	Inc.
DOCUMENT NUMBER: POSOOJIZO	1646
The enclosed Statement of Change of Registered Office/Ag	gent and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Ryan J. H. Name of Contact	1 (13011
Holihan U	entures, Inc.
2513 Trei	Hwood Blud.
Belle City/State and Zi	Isle, FL 32812
E-mail address: (to be used for future	annual report notification)
For further information concerning this matter, please call:	
Ryan J. Holihan at	(407) 375-2003 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department	-
Mailing Address:	Street Address:
Amendment Section Division of Corporations	Amendment Section
P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Holihan Ventures, Inc.	
2. The principal office address: 2513 Trentwood Blyd.  Belle Isle FL 32812	
3. The mailing address (if different): Some	
4. Date of incorporation/qualification: 920205 Document number: P05000129	<u>ل</u>
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
Kyan & Holihan	
200 Pasadera Hace	
20 Pasadera Mace Orlando, FL 32803  6. The name and street address of the new registered agent (if changed) and /or registered office	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Ryan Holihan	
2513 Trentwood Blvd.	
P.O. Box NOT acceptable	
Belle Isle, FL 32812	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
_ / // Long fort And	
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Typed or Printed Name	

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

\* \* \* FILING FEE: \$35.00 \* \* \*