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(Re	questor's Name)	
(Ad	dress)	<u></u>
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(Bu	siness Entity Nar	me)
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJE	Clearlink Communication, L.	L.C.						
	Nam	e of Limite	d Liability Company					
Dear S	ir or Madam:							
The en	closed Registered Agent/Registered Offi	ce Change	and fee(s) are submitted for filing.					
Please	return all correspondence concerning thi	s matter to	the following:					
Amy l	L. Young							
	Name of Person							
The \	/illages of Lake-Sumter, Inc.							
	Firm/Company							
1020	Lake Sumter Landing							
	Address							
The \	/illages, FL 32162							
	City/State and Zip Code							
amy.y	young@thevillages.com							
E	-mail address: (to be used for future annual	ual report r	otification)					
For fur	ther information concerning this matter,	please call	:					
Amy I	L. Young	352 at (753-6729					
	Name of Person		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		1 \$55 Filing Fee & Certified Copy					

INHS18 (2/14)

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.

	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 1020 Lake Sumter Landing The Villages, FL 32162 08/01/2000 Date of filing/registration in Florida Registered Agent and Registered Office shown on the records of	(t)	Mailing add (<u>Note: M</u> ke Sumt	ress of lim IAY BE Po ter Land . 32162	ited liab OST OF ding	ility company: FICE BOX)	
3. 5. (a)	(Note: MUST BE STREET ADDRESS) 1020 Lake Sumter Landing The Villages, FL 32162 08/01/2000 Date of filing/registration in Florida	 4.	1020 La	Mailing add (<u>Note: M</u> ke Sumt ages, FL	ress of lim IAY BE Po ter Land . 32162	ited liab OST OF ding	ility company:	
5. (a)	The Villages, FL 32162 08/01/2000 Date of filing/registration in Florida		The Villa	ages, FL 09118	. 32162			
5. (a)	08/01/2000 Date of filing/registration in Florida			09118				
5. (a)	Date of filing/registration in Florida		L000000					
5. (a)				Documen				
					nt numbe	er		
(b)		the Florida	Dept. of State	e:				
(b)	Roy, Steven M							
(b)	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS	2	_				
(b)	1028 Lake Sumter Landing							
(b)	The Villages	32162		_				
(b)	, / L			-				
				_	ren."			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	dress:	-		다고# 다간에 나보고		
	Brian D. Hudson, Esq.			_	AHAS MASS	35 		
	NEW Registered Office Address:					0		
	1020 Lake Sumter Landing			_	- ' ' '	\triangleright		
	The Villages, FL	32162		_	OF STATE	65 33	Ò	
the chargent was/w	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	the regi ability co of the lim limited	stered office ompany, it i sited liabilit siability con	e and the l s hereby c y compan npany.	business confirme y or as o	office d that t therwis	of the registe he change(s) se provided i	ered)
1	the Our tony	Kel	sea Mors	• •	*			
I here provis the ob- to mer notifie	ture of a member or authorized representative of a member by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I i d in writing of this change. The of Registered Agent	ee to ac perform d for in (hereby c	t in this cap ance of my Chapter 60: onfirm that	Printed or acity. I fu duties, an 5, F.S. Or the limited	rther ao	ree to e	comply with	the cept iled n