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## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJI	RUM ROW 3450 LLC	
5020.		ne of Limited Liability Company
Dear S	ir or Madam:	•
The en	closed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.
Please	return all correspondence concerning th	is matter to the following:
Doug	ılas A. Wood	
	Name of Person	
	. Name of Person	•
Doug	las A. Wood, P.A.	
***************************************	Firm/Company	=======================================
700 1	11th Street South, Suite 102	AFK
	Address	
Naple	es, Florida 34102	
	City/State and Zip Code	
steph	nanie@dougwoodlaw.com	
Ē	E-mail address: (to be used for future ann	ual report notification)
For fu	rther information concerning this matter,	please call:
Doug	las Wood	239 263-7740
	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	□ \$55 Filing Fee & Certified Copy
INHSI	8 (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.

l. N	ame of the limited liability company: HUM HUW 3	450 LL		
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  253 Weatherhill Drive	(b	)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	West Chester, PA 19382			
	3/09/2015		L150000	
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	CT Corporation System			
	Registered Agent and Registered Office shown on the records of Registered Office Address  MUST BE FLORIDA STREET.  1200 South Pine Island Road			17 APR
•	Plantation , FL	33324		- Par Section
(b)	Douglas A. Wood  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	dress:	L CORIDA
	NEW Registered Office Address:			_
	700 11th Street South Suite 102			
	Naples , FL	34102		
the changent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the form	f the regis ability co of the lime limited l	stered officempany, it intended in the state of the state	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany.
Signa	ature of a member or authorized representative of a member	***************************************		Printed or typed name of signee
I here provis the ob to men notifie	thy accept the appointment as registered agent and aginous of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect ochange in the registered office address, I din writing of this entinge.	ree to act perform d for in ( hereby c	in this ca ance of my Chapter 60 onfirm tha	pacity. I further agree to comply with the duties, and I am familiar with and accepts, is this document is being filed the limited liability company has been
Signan	ire of Revisier of Agent			