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## COVER LETTER

Division of Corporations
SUBJECT: 4270 Church Street, 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:
Jeffrey A Ashton Name of Person
4220 Church Street, LLC Firm/Company
2001 Alagua Lakes Blud. Address
Longwood, FL 32779  City/State and Zip Code
Jashton 1 @ gms. 1. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Teff Ashton at (407) 416 9402  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

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.

L No	ame of the limited liability company: 4270 Church Street LLC
2. (a)	
	Longwood, FL 32779 Longwood, FL 32779
	8/2/16
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	Long wood FI. 32779
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	(Same)
	NEW Registered Office Address:  2001 Alagua Lakes Blud
	Longwood, FL 32T79
the cha agent v	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after inge or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited hability company or as otherwise provided in icles of organization or the operating agreement of the limited liability company.
Signa	ture of a member or authorized terrefent vive of a member Printed or typed name of signee
the obli to mere notified	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igentons of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a chapter of the registered office address, I hereby confirm that the limited liability company has been d in writing of this change.
Signatu	re of Regisferfd Agent