

L16000171167

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

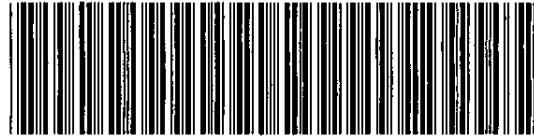
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900295150889

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 MAR -3 PM 3: 04

03/08/17--01002--001 **55.00

RECEIVED
2017 MAR -3 PM 2: 56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
MAR - 3 2017

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. Name of the limited liability company: ROBERT GREEN AND ASSOCIATES LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
1562 SE VILLAGE GREEN DRIVE
PORT ST LUCIE, FLORIDA 34952

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
3620 NARROLINE DRIVE
ORLANDO, FLORIDA 32818

SEPTEMBER 13, 2016

L16000171167

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:

ALCID E ALUSCA
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
3620 NARROLINE DRIVE
ORLANDO, FL 32818

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 MAR - 3 PM '04

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

ALAND DERVIS
NEW Registered Office Address:
3620 NARROLINE DRIVE
ORLANDO, FL 32818

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Alcid E Alusca
Signature of a member or authorized representative of a member

ALCID E ALUSCA
Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Alcid E Alusca
Signature of Registered Agent