L/6000/88328

(Re	questor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: THE SILVER TRUNK, 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:			
DIANE I. BIJOLLE Name of Person			
THE SILUER TRUNK, LLC Firm/Company			
102 NE 2ND STREET # 320 Address			
BOCA RATON, FL 33432 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
DIANE BIJOUE at (561) 413-4942 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 \$25 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

rioria	α .
1. Na	ime of the limited liability company: THE SILVER TRUNK, LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) 102 NE 2ND STREET #32 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	BOCA RATON, FL BOCA RATON, FL
	33432 33432
3.	Date of filing/registration in Florida LIG 000 88328 Document number
5. (a)	DIANE I. BIJOLLE
.,	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	2406 RENAISSANCE WAY. Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) BOYNTON BEACH, FL 33426 FL SS T
	,FL
(b)	The state of the s
	102 NE 2ND STREET # 320 NEW Registered Office Address:
	BOCA RATON, FL 33432
the cha agent was/w	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after ange 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) ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in icles of organization or the operating agreement of the limited liability company.
	DIANE I. BIJOLLE
-	ature of a member or authorized representative of a member Printed or typed name of signee
I here provis the ob- to mer notifie	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 ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a change in the registered office address, I hereby confirm that the limited liability company has been d in writing of this change.

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent