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(Requestor's Name)

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(City/State/Zip/Phone #)

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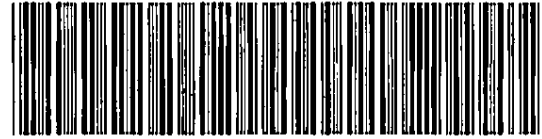
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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R. W. WHITE  
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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Mermaids In The Sun I, 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:

Mary Beth L. Sweeney, Esquire

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

8 Alison Way

\_\_\_\_\_  
Address

Andover, MA 01810

\_\_\_\_\_  
City/State and Zip Code

mbsweeney@atwoocherry.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Beth L. Sweeney, Esquire

(617) 262-6400

\_\_\_\_\_  
Name of Person

at ( \_\_\_\_\_ )

\_\_\_\_\_  
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

**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: Mermaids In The Sun I, LLC

2. (a) Mary Beth Sweeney (b) Mary Beth L. Sweeney

Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)

8971 Bismark Palm Road

8 Alison Way

Kissimmee, FL 34747

Andover, MA 01810

July 1, 2019

L19000170626

3. Date of filing/registration in Florida

4. Document number

5. (a) Ray Princiotta

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Ray Princiotta

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1951 NW 7th Avenue, Suite 600

Miami, FL 33136

(b) Sandra Valentim

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

Sandra Valentim

NEW Registered Office Address:

4378 Colony View Drive

Lake Worth, FL 33463

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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.

M B Vecchio

Signature of a member or authorized representative of a member

Mary Beth L. Vecchio, managing member

Printed or typed name of signer

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.

Sandra Valentim

Signature of Registered Agent