3/26/2018

Division of Corporations

Florida Department of State

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Division of Corporations

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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone : (561)694-8107
Fax Number : (561)694-1639 samaco mali nic

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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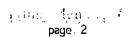
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Corporate Filing Menu

Help

S. WARREN

MAR 27 2018



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.

	ume of the limited liability company: DC LAND, I 7 WEST 7 STREET		7 W	VEST 7 STREET
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<u></u>	(b)	Mailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)
	Cincinnati, OH 54202		Cin	cinnati, OH 54202
	09/13/2017		M17	000007755
3,	Date of filing/registration in Florida	 4.		Document number
5. (a)	Corporation Service Company	1,		
J. (4)	Registered Agent and Registered Office shown on the records		da l.)ept.	of State:
	1201 Hays Street			•
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRE.	5.52	TASE SEE
	Tallahasse	FL_3230	1-2525	HAR 2
(b)	Corporate Creations Network Inc.	 	yjî!-	SE 6
	Enter name of NEW Registered Agent and/or NEW Register	red Office :	ddress:	
	11380 Prosperity Farms Rd. #221E			AM II: 10
	NEW Registered Office Address:		- ·	
	Palm Beach Gardens	FL 3341	0	
the cha agent v was/wa	imited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member celes of organization or the operating agreement of the member of the member of the operating agreement of the operat	laws of the replication of the replication of the limited he limited	ne State gistered compan mited li i liabilit	office and the business office of the registered by, it is hereby confirmed that the change(s) lability company or as otherwise provided in
Signa	sture of a member or authorized representative of a member	<u>~</u>	.1013.103	Printed or typed name of signee
I here provisi the obj to mer	by accept the appointment as registered agent and clions of all statutes relative to the proper and completigations of my position as registered agent as proviety reflect a change in the registered office address, d in writing of this change.	agree to a ete perfor Ided for it I hereby	et in the mance of Chapte confirm	is capacity. I further agree to comply with the of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed n that the limited liability company has been
Sign	arc of Registered Agent			
	ra Racicot, Special Secretary		- 2°	
	Division of Corporations P.C FILING). Box 63 ; FEE: \$2		Hahnssee, FL 32314

INHS18 (2/14)