L16000200055

(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							
en e							



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11/14/17--01005--021 **25.00



COVER LETTER

TO:	Registration Section Division of Corporations									
SUBJE	SUBJECT:									
	Name	e of Limited Liab	oility Company							
Dear Si	ir or Madam:									
The end	closed Registered Agent/Registered Offic	ce Change and fe	e(s) are submitted for filing.							
Please	return all correspondence concerning this	s matter to the fo	llowing:							
Debor	rah Love									
	Name of Person									
Friedr	nan, Rosenwasser & Goldbaum									
	Firm/Company		•							
7280	W. Palmetto Park Rd., Ste. 202-N									
	Address		•							
Boca	Raton, FL 33433									
	City/State and Zip Code		•							
dlove(@frglaw.com									
E-	-mail address: (to be used for future annu	ual report notifica	ition)							
For fur	ther information concerning this matter,	please call:								
Debor	ah Love	561 at (404-8755							
	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	Regis Divis P.O. 1	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		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.

1. Na	ame of the limited liability company: 305 Concepts	s Palm Be	each Manag	gement, LLC			
2. (a)	Royal Poinciana Plaza	(b)	Friedman, Rosenwasser & Goldbaum, P.A				
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	340 Royal Poinciana Way, Ste. 333	7	7280 W. Palmetto Park Rd., Ste. 202-N Boca Raton, FL 33433				
	Palm Beach, FL 33480						
	10/31/2016	L16000200055					
3.	Date of filing/registration in Florida	- _{4.} -	Doc	cument number			
5. (a)	Friedman, Rosenwasser & Goldbaum, P.A.						
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida D	ept. of State:	*****			
				<u> </u>			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				NOV.		
	5355 Town Center Rd., Suite 801			AS	- Trainer		
	Boca Raton FI.	33486		SEE	Co pinter		
	5: 1 B			. H			
(b)	Friedman, Rosenwasser & Goldbaum, P.A.			£ A			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			D	₫		
	NEW Registered Office Address:						
	7280 W. Palmetto Park Rd., Ste. 202-N						
	Boca Raton , FL	33433					
the cha agent v was/we the arti	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of icles of organization or the operating agreement of the ture of a member or authorized representative of a member	the registe ability com of the limite limited lia	red office and pany, it is he ed liability co	d the business offi reby confirmed that impany or as other ny.	ce of the registered at the change(s)		
provisi the obl to mer	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I id in writing of this change.	ree to act ir performan d for in Ch hereby con	this capacity ce of my duti apter 605, F., firm that the i	y. I further agree es, and I am famil S. Or, if this docu limited liability co	to comply with the iar with and accept ment is being filed mpany has been		
Signatu	ire of Registered Agent						

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