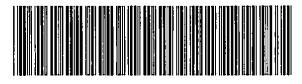
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(Address)						
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COVER LETTER

TO: Registration Section Division of Corporation							
BUYERS & SUBJECT:	SELLERS COMPLETE REALT	Y, LLC	0-13-20				
	Name of Limited Liability Company						
Dear Sir or Madam:							
The enclosed Registered .	Agent/Registered Office Change	e and fee(s) are submitted f	for filing.				
Please return all correspo	ndence concerning this matter to	o the following:					
CHARLES LIBERIS, ESC	⊋UIRE						
	Name of Person						
LIBERIS LAW FIRM							
ļ.	irm/Company						
212 W. INTENDENCIA S	TREET						
	Address						
PENSACOLA, FL 3250							
City/	State and Zip Code						
ASSISTANT@LIBERISLA	AW.COM						
E-mail address: (to	be used for future annual report	notification)					
For further information co	oncerning this matter, please cal	I:					
SANDY HOGUE	850 at (438-9647					
Name of		Area Code & Dayt	ime Telephone Number				
Mailing Address Registration Sectorial Division of Cortain P.O. Box 6327 Tallahassee, FL	ction porations	Street Address: Registration Sect Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL.	orations illahassee Street, Suite 810				
Enclosed is a cho	eck for the following amount:						
\$25 Filing Fee		□ \$55 Filing Fee & Certi	tied 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.

I. Ni	ame of the limited liability company:	LERS	CO	MPLETE	REALTY, LLC	
2. (a)	2003 NORTH 9TH AVENUE		2003 NORTH 9TH AVENUE			
(49)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(.,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	PENSACOLA, FL 32503	_		PENSAC	OLA, FL 32503	
	03/06/2001	_	L_	01000003	3588	
3. 5. (a)	Date of filing/registration in Florida REGISTERED AGENTS, INC.	4.			Document number	
	Registered Agent and Registered Office shown on the records of t 7901 4TH STREET, N	the Flo	rida I	Dept. of Stat	- e:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) SUITE 300			•~5		
	ST. PETERSBURG , FL.	3370	2		75/100T 15	
(b)	CHARLES S. LIBERIS, ESQUIRE					
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	<u>Office</u>	addi	r <u>ess</u> :	Pli	
	212 WEST INTENDENCIA STREET			??		
	NEW Registered Office Address:	•	_ • •		J	
	PENSACOLA , FL	3250	2		_	
change agent y was/ye	imited/liability company is not organized under the law of changes are made, the Florida street address of the full be identical. Or, in the case of a Florida limited lia ere authorized/by amaffirmative vote of the members of idea of organization or the operating agreement of the	regist bility f the l limite	ered con limit d lia	office an pany, it is ed liabilit bility con	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	
Signa	ture of a member or authorized representative of a member	-	· ·		Printed or typed name of signee	
provisi the obl to mere	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect ac hange in the registered office address. I h I in writing of this change.	ee to e perfor l for it tereby	act it mar n Cl s con	this cape we of my e apter 605 firm that	acity. I further agree to comply with the duties, and I am familiar with and accept i. F.S. Or, if this document is being filed the limited liability company has been	
Signatu	re of Registered Agent					