(Red	luestor's Name)						
(Add	Iress)						
(Address)							
(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificates	s of Status					
Special Instructions to Filing Officer:							

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195						
REFERENCE : 658688 4730704						
AUTHORIZATION Spellice No.						
COST LIMIT : \$ 55.00						
ORDER DATE : May 25, 2017						
ORDER TIME : 3:25 PM						
ORDER NO. : 658688-005						
CUSTOMER NO: 4730704						
CHANGE OF AGENT						
NAME: SARASOTA MOORINGS, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
XX CERTIFIED COPY PLAIN STAMPED COPY						
CONTACT PERSON: Melissa Zender EXT#						
EXAMINER:						



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: Sarasota Mo	orings	, LLC	<u>-</u>
2.	(a)	2 Marina Plaza	(b)	2 Marina Plaza	
	` '	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (-)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		Sarasota, FL 34236		Sarasota, FL 3423	6
		December 17, 2003		L03000053935	
3.		Date of filing/registration in Florida	4.	Document nu	ımber
5.	(a)	LPS Corporate Services, Inc.			
	• •	Registered Agent and Registered Office shown on the records of the	e Florida	Dept. of State:	
		46 North Washington Boulevard			
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)		To -
		Suite 1			7 7 H
		Sarasota , FL 3	34236		FIL MAY 25 CRETARN LAHASS
	(b)	Corporation Service Company			LED RY OF
		Enter name of NEW Registered Agent and/or NEW Registered O	office add	ress:	
		1201 Hays Street			9: 42 STÁTE LORIDA
		NEW Registered Office Address:			
		Tallahassee	22204	2525	
		, FL.	32301-	2525	
the age wa	cha: ent w s/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regist pility con the limit mited lia	ered office and the busing appany, it is hereby conficed liability company or	ness office of the registered rmed that the change(s) as otherwise provided in
-	: -		Marin	a Jack Holdings, Inc., So	ie Member
	-	ure of a member or authorized representative of a member			d name of signee
pro the to i	ovisio obli nere	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	erformai fòr in Cl reby coi	ace of my duties, and La	on tamiliar with and accept
Sig	notur	e of Registered Age	Asst.	Vice President	•