## W4000039016

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	
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## COVER LETTER

Division of Corporations		
Channelside Holdings, LLC		
	Name of Limited Lia	ability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered (	Office Change and f	ee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the fo	ollowing:
John T. Keiser		
Name of Person		_
Channelside Holdings, LLC		
Firm/Company		_
3401 Bayshore Blvd: Unit 2500		
Address		_
Гатра. FL 33629		
City/State and Zip Code	e	_
ack@jtkeiser.com		
E-mail address: (to be used for future a	annual report notific	ration)
For further information concerning this matt	ter, please call:	
Raylee McGough	813 at (	221-2777
Name of Person		Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the followi	ing amount:	
■ \$25 Filing Fee	<b>□</b> \$55	5 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.

. (a)			b)		
, ,	Principal office address of limited liability com (Note: MUST BE STREET ADDRESS)	pany:		Mailing address of limited lia (Note: MAY BE POST O.	
					-
	May 21, 2004		L04000	039016	
	Date of filing/registration in Florida	4.		Document number	
. (a)	J.T. Keiser, LLC				
. (4)	Registered Agent and Registered Office shown on the r	ecords of the Florid	a Dept. of	State:	
	324 Blanca Avenue				
	Registered Office Address (MUST BE FLORIDAS	STREET ADDRES	<u>S)</u>		15
				, , , , , , , , , , , , , , , , , , ,	SF ( 2)
	Tampa	FL_33602			SECRETARY OF S
	Tampa	, r.L		—— P	A N
(b)				ņ	Ko = T
(-,	Enter name of NEW Registered Agent and/or NEW R	Registered Office a	ddress:	<del></del>	
	3401 Bayshore Blvd				2: 35 F. Jan
	NEW Registered Office Address:			<del></del>	
	Unit 2500			<del></del>	
	Татра	, FL			
	· · · · · · · · · · · · · · · · · · ·				
the I	imited liability company is not organized under or changes are made, the Florida street address	er the laws of the	State of	Florida, it is hereby confir	med that after the
gent v	vill be idéntical. Or, in the case of a Florida li	mited hability c	ompany,	it is hereby confirmed that	the change(s)
ras/wo ne arti	ere authorized/by an affirmative vote of the me cles of organization or the operating agreemer	embers of the lir at of the limited	nited lial liability	oility company or as otherw company.	ise provided in
			n T. Keis	•	
Signa	ture of a mentber or authorized representative of a memb	ær —		Printed or typed name of si	gnec
here rovisi ne obl	by accept the appointment as registered agent ons of all statutes relative to the proper and co igalions of my position as registered agent as ely reflect a change in the registered office add	and agree to ac omplete perform provided for in dress, I hereby c	t in this ( ance of Chapter onfirm to	capacity. I further agree to my duties, and I am familia 605, F.S. Or, if this docum nat the limited liability com	comply with the r with and accep ent is being filed pany has been