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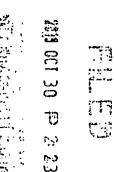
(Requestor's Name)				
(Address)				
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(Cit	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of	of Status		
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Special Instructions to Filing Officer:				
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COVER LETTER

TO: Registration Section Division of Corporations			
Catalina Halnat LLC SUBJECT:			
	ne of Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	ice Change and fee(s) are submitted for filing.		
Please return all correspondence concerning thi	is matter to the following:		
Marina Huang			
Name of Person			
PCCO, Inc			
Firm/Company			
PO Box 414198			
Address			
Miami Beach, FL 33141			
City/State and Zip Code			
marina.huang@southbeachgroup.com			
E-mail address: (to be used for future ann	ual report notification)		
For further information concerning this matter,	please call:		
Marina Huang	at ()		
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	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:			
2 \$25 Filing Fee	☐ \$55 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.

Name of the limited l	iability company: Catalina Ha	Inat LLC	
	e, Miami Beach FL 33139	 (b) _855	Collins Ave, Miami Beach FL 33139
Principal offic	e address of limited liability company: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
07/15/2004	ling/registration in Florida		00052468 Document number
PCCO, Inc			
Registered Agent and 855 Collins Av Registered Office Ad			of State:
Miami Beach		_{FL} 33139	
(b) Entin, Joshua (M. Esq		- Per 2
Enter name of NEW	Registered Agent and/or NEW Register	red Office address:	1 30
633 Andrews	Ave /		T T
NEW Registered Off	fice Address:	<u>`</u>	ال برا المرا ا
Suite 1970		:	
Ft Lauderdale		FL33301	
e change or changes are gent will be inculted. One as/were authorized by a e articles of organization	e made, the Florida street address or, in the case of a Florida limited in affirmative vote of the member on of the operating agreement of the	i of the registered I liability compar is of the limited li	berman
Signature of a mounter or a	thorized representative of a member		Printed or typed name of signee
hereby accept the apportunitions of all statutes e obligations of my post merely reflect a changotified in writing of this	relative to the proper and compr sition as registered agent as provi e in the registered office address	agree to act in the ete performance di ided for in Chapt , I hereby confirm	is capacity. I further agree to comply with the of my duties, and I am familiar with and acce er 605, F.S. Or, if this document is being file in that the limited liability company has been
ignative of Registered Agen			
	Division of Corporations P.G	D. Box 6327• Ta	llahassee, FL 32314
•	FILING	FEE: \$25.00	•

INHS18 (2/14)