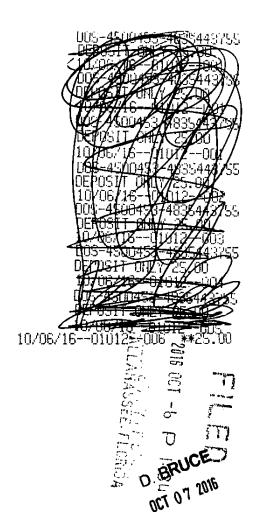
## 

(Re	questor's Name)				
(Ad	dress)	····			
(Ad	dress)				
(Cit	ty/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nam	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to	Filing Officer:				





10/06/16---01012---006 \*\*25.00



## **COVER LETTER**

TO: Registration Section

Division of Corporations						
SUBJECT: 382-386 ST ARMANDS CIF	RCLE LLC					
	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Off	fice Change ar	nd fee(s) are submitted for filin	ng.			
Please return all correspondence concerning the	nis matter to th	ne following:				
ADAM SELIGMAN, ESQ.						
Name of Person						
WARD DAMON PL						
Firm/Company		<del></del>				
4420 BEACON CIRCLE						
Address		<del></del>				
WEST PALM BEACH, FL 33407						
City/State and Zip Code						
ASELIGMAN@WARDDAMON.COM						
E-mail address: (to be used for future and	nual report not	tification)	2. 2.			
For further information concerning this matter	, please call:		2118 OCT			
ADAM SELIGMAN	561	842-3000	ASSE			
Name of Person	at (	Area Code & Daytime Te	lephone Number 📆			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	F [ F	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, Florida 32314				
Enclosed is a check for the following	g amount:					
☑ \$25 Filing Fee		\$55 Filing Fee & Certified Co	ру			
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	me of the limited liability company: 382-386 ST A	RMAN	DS CIRCI	LE LLC			
٠.	(u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			any: X)		
		7 LAGOMAR ROAD	7 LAGOMAR ROAD					
		PALM BEACH, FL 33480	PALM BEACH, FL 33480					
		12/23/2004		L0400009	93087			
3.		Date of filing/registration in Florida	4.		Document nun	nber		
5.	(a)							
٥,	(μ)	Registered Agent and Registered Office shown on the records of MATHIEU P. ROSINSKY	the Florida	Dept. of State	<b>:</b>			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  7 LAGOMAR ROAD								
		PALM BEACH , FL	33480		· -	IACLAHASSEE I LUBION	2016 OCT	77
	(b)					N.	jCi -	MARKET AND
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	iress:	-	Ls. 7 (13)	70	
		ADAM SELIGMAN, ESQ.					77.	المستركة المستركة
		NEW Registered Office Address:	-		•	<u> </u>	ro Lo	
		4420 BEACON CIRCLE		·	_	74		
		WEST PALM BEACH , FL	33407		-			
th ag w	e cha gent v as/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registability constitution of the limited in th	stered office ompany, it is lited liability	e and the busing s hereby confir y company or a	ess office med that t	of the ro the chan	egistered ge(s)
			MA	THIEU P.	ROSINSKY			
	Signa	ture of a member or authorized representative of a member			Printed or typed	name of sig	nee	
pr th to	ovisi e obi mer	by accept the appointment as registered agent and agt ions 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 d in writing of this change.	ree to act perform d for in ( hereby co	in this cap ance of my Chapter 605 onfirm that	acity. I further duties, and I an 5, F.S. Or, if th the limited liab	agree to n familian is docume pility comp	comply with an ent is be pany has	with the id accept ing filed i been
Ŝ	ignatu	re of Registered Agent						