Division of Corporations Electronic Filing Cover Sheet

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(((H210000699283)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : INCORP SERVICES INC

Account Number : 120120000007

: (702)866-2500

Fax Number

: (702)866-2689

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_documents@incorp.com

## LLC REGISTERED AGENT CHANGE FLORIDA SUCCESS 6366, LLC

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INHS18 (2/14)

COVER LETTER

H21000069928 3

ro: Registration Section Division of Corporations				
	DA SUCCESS 6366, LLC			
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
. Janice Null				
Name of Person				
I- Cour Continue Inc				
InCorp Services, Inc.	<del></del>			
Firm/Company				
3773 Howard Hughes Pkwy Suite	500S			
Address				
Las Vegas, NV 89169-6014				
City/State and Zip Code				
documents@incorp.com	•			
E-mail address: (to be used for future annu-	al report notification)			
For further information concerning this matter, p	please call:			
Janice Null for InCorp Services, Inc.	800-246-2677			
Name of Person	_ at 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 following a	amount:			
■ \$25 Filing Fee	\$55 Filing Fee & Certified Copy			

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY H21000069928 3

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.

١.	Nat	me of the limited liability company: FLORIDA SUCC	CESS	6366, LLC	
2. (		Principal office address of limited liability company:  (Nate: MUST BE STREET ADDRESS)		b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.		12/27/2004  Date of filing/registration in Florida	- 4.	 L040000	93358  Document number
5.	(a)	Stark, Charles H  Registered Agent and Registered Office shown on the records of the Florida Dept. of State  312 North Park Avenue, Suite 2-A  Registered Office Address		_ <u>-</u>	
(Ъ		Winter Park, FL_	_	32789	E TE TE
	(Ъ)	InCorp Services, Inc.  Enter name of NEW Registered Agent and/or NEW Registered of 17888 67th Court North  NEW Registered Office Address:	Office :	nddress:	PH 5: 40
		Loxahatchee, FL		33470	<del></del>
the	cha ent v	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 lise are authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the reability f the l limite	gistered off company, i imited liabi d liability c	t is hereby confirmed that the change(s) lity company or as otherwise provided in company.
_	Sima	ture of a member or authorized representative of a member	_	arol R. Fe	Printed or typed name of signee
In protection to no	here ovis e ob mer tifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I is different for writing of this change.  Isabel Burgos on behavior of Registered Agent.	d for it hereby	n Chapter 6 confirm th	apacity. I further agree to comply with the ny duties, and I am familiar with and accept 505, F.S. Or, if this document is being filed at the limited liability company has been