L0500000 8926

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100R 8/4/14

COVER LETTER

TO:	Registration Section Division of Corporations					
: CHD I	Park Place Advantage, LLC					
SUDJ :		of Limited Li	ability Company			
Dear	Sir or Madam:					
The e	nclosed Registered Agent/Registered Office	e Change and	fee(s) are submitted for filing.			
Pleas	e return all correspondence concerning this	matter to the	Collowing:			
;						
Albir	no J. Teixeira					
	Name of Person		_			
Park	Place Advantage, LLC					
	Firm/Company					
1508	8 S. Chickasaw Trail					
1	Address					
Orla	ndo, FL 32825					
•	City/State and Zip Code		_			
bteix	x23232@aol.com					
•	E-mail address: (to be used for future annua	al report notif	ication)			
For f	urther information concerning this matter, p	lease call:				
Albii	no Teixeira	407	625-2073			
ī	Name of Person	_ at (Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.C	aiLing Address: gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314			
	Enclosed is a check for the following amount:					
	■ \$25 Filing Fee	= \$:	55 Filing Fee & Certified Copy			
ĮNHS	518 (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. N	lame of the limited liability company: Park Place A	dvantage, LLC			
2. (a)	1508 South Chickasaw Trail	(b) 1508	(b) 1508 South Chickasaw Trail		
- (-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
:	Orlando, FL 32825	Orlar	ido, FL 32825		
	01/28/2005	L0500	0008926		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a	Michael J. Gasdick				
1. (Registered Agent and Registered Office shown on the records of	the Florida Dept. of	State:		
1	390 N. Orange Avenue, Suite 260				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
:					
	Orlando , FI	32801	FLED H31 P		
	Alhino Taivaira		FILED		
(b)	(b) Addition Televeria Enter name of NEW Registered Agent and/or NEW Registered Office address:				
		omer address.	ADIT		
		,			
	NEW Registered Office Address:				
1	1508 South Chickasaw Trail				
;	Orlando	00005			
	Orlando, Fl	_32825	<u></u>		
the chagent was/v	limited liability company is not organized under the la lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	f the registered o lability company of the limited lia	ffice and the business office of the registered, it is hereby confirmed that the change(s) bility company or as otherwise provided in		
X		Albino Te			
	ature of a member or authorized representative of a member		Printed or typed name of signee		
provis the ob to me	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change.	ree to act in this e performance of ed for in Chapter hereby confirm t	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed hat the limited liability company has been		
Signat	ure of Registered Agent				

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00