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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: ENT Countryside, LLC		
	Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office O	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
Jeff Steinert		
(Name of Person)		
Pepple Johnson Cantu & Schmidt, PLLC		
(Firm/Company)		
1019 Third Avenue Suite 1000		
1218 Third Avenue, Suite 1900 (Address)		
(/		
Seattle, WA 98101		
(City/State and Zip Code)		
For further information concerning this matter, plea	ase call:	
3		
Jeff Steinert at (2	06 625-9984	
(Name of Person)	(Area Code & Daytime Telephone Number)	
CTREET/COURIED ADDRESS.	MAN ING ADDDEGG	
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: ENT Countryside, LLC

2. The mailing address of the limited liability company is: 1330 S. Fort Harrison Avenue.

2. The mailing address of the limited liability company is : 1330 S. Fort Harrison Avenue,

Clearwater, FL 33756

March 28, 2005

Date of filing/registration in Florida

L05000030464

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Emil Pratesi

Name

1253 Park Street

Address

Clearwater, FL 33756

City, State and Zip

6. The name and address of the new registered agent and/or office:

David O. Cantu

Name

25400 US Highway 19 N, Suite 116
Florida street address (P.O. Box NOT acceptable)

Clearwater FL 33763
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization on the operating agreement of the limited liability company.

(Signature of a member or authorized representative of a member)

Lance M. Cohen, President of ENTA Investments II LLC, Sole Member

(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address) I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)