L05000046133

(Requestor's Name)						
(Address)						
(Address)						
(Cit	y/State/Zip/Phon	e #i				
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificate:	s of Status				
Special Instructions to Filing Officer:						

Office Use Only



800263733838

09/03/14--01004--021 **25.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

UC RAJ Ro Change

SEP 192014 T. CARTER HAHN 🕕 LOESER

Jeanne L. Seewald

Direct Phone: 239.254.2905 Direct Fax: 239.254.2942 Email: jseewald@hahnlaw.com

August 22, 2014

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Veroxi Maxmor, LLC

Dear Sir/Madam:

Enclosed for filing with respect to the above-referenced limited liability company is a Statement of Change of Registered Agent and our check in the amount of \$25.00 for the filing fee.

Please return all correspondence regarding this matter to the following:

Jeanne L. Seewald, Esq. Hahn Loeser & Parks, LLP 5811 Pelican Bay Boulevard, Suite 650 Naples, FL 34108

If you have any questions or require additional information, please call me at the number above.

Cordially yours,

HÁHN LOESER & PARKS LLP

Jeanne L. Seewald

Florida Bar Board Certified as a

Specialist in Intellectual Property Law

JLS/caf Enclosure

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: Veroxi Maxm	nor	, LL	С —	C
		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)
		8805 TAMIAMI TRAIL N STE 239				122 OAKVIEW DRIVE
		NAPLES, FL 34108				GREENVILLE, SC 29605
				-		
		05/09/2005			L	L05000046133
3.		Date of filing/registration in Florida		4.	_	Document number
5. (a)	Hahn, Loeser, and Parks				
•		Registered Agent and Registered Office shown on the records of	f the	Florid	da l	da Dept. of State:
		Registered Office Address (MUST BE FLORIDA STREET	`AD	DRES	<u>(SS)</u>	<u>SS)</u>
		800 Laurel Oak Drive, Suite 600				
		Naples , FI	L_	3410	38	D8 TALL
(1	o)	HL Statutory Agent, Inc.				SEP -3
(1	"	Enter name of NEW Registered Agent and/or NEW Registered	d O	ffice a	dd	ddress:
						PH 3:
		NEW Registered Office Address:				STATE LORIDA 3: 02
		5811 Pelican Bay Boulevard, Suite 650				
		Naples	ı	3410	28	08
the cagen was/	ha t w we	mited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited lare authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f th iab of	ne reg ility o the lin mited	gist cor mi Hi:	gistered office and the business office of the registered company, it is hereby confirmed that the change(s) mited liability company or as otherwise provided in liability company.
Sig	nat	ure of a member or authorized representative of a member			_}	Printed or typed name of signee
I he prov the c to m noti	reb isio bli gge ika		gree e pe ed j he			ot in this capacity. I further agree to comply with the nance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed confirm that the limited liability company has been
		•	D.c	(23		77a Tallaharana El 20214