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K. SALY APR - 3 2017

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: CD ENTERPRISES, LLC					
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter	to the following:				
Nancy Luna					
Name of Person					
LEGALINC CORPORATE SERVICES INC.					
Firm/Company	The state of the s				
5850 GRANITE PARKWAY, SUÎTE 215					
Address					
PLANO, TX. 75024					
City/State and Zip Code					
filings@legalinc.com					
E-mail address: (to be used for future annual repo	rt notification)				
For further information concerning this matter, please c	all:				
NANCY LUNA at (8	18 967-1467				
Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327				
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee. Florida 32314				
Enclosed is a check for the following amount	·• •				
፟ቕ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy				
DILIC10 (2/14)					

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. N	ame of the limited liability company: CD ENTERPR	RISES, L	LC	
2. (a)	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS) 8188 Pine Circle	_ (b)	N	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Isleigh Ave.
	Tamarac, FL. 33321	<u>.</u> .	Bluffton,	SC. 29910
	06/22/2005	L	0500006	3956
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	NRAI SERVICES, INC			
	Registered Office Address MUST BE FLORIDA STREET A		Ocpt. of State	
	1200 South Pine Island Road			
	Plantation . FL_	3332	4	AR:
(b)	LEGALINC CORPORATE SERVICES INC.			SS
(0)	Enter name of NEW Registered Agent and/or NEW Registered C	Office addr	<u>ess</u> :	2017 HAR 31 PH 3 49 SEURETARY OF STATE FALLAHASSEE, FLORIDA
	NEW Registered Office Address:			Ē. O
	5237 Sumerlin Commons Suite 400			
	Fort Meyers	339	907	
the cha agent v	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the light	he registe pility con the limit	ered office apany, it is ed liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	Charalas Thees	Doug	-	rs, Member
I here provisi the obt to mer notified	ture of a member or authorized representative of a member by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I hid in writing of this change. Why re of Registered Agent	e to act i performan for in Ch preby: con		Printed or typed name of signee ocity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been