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SECRETARY OF STATE

COVER LETTER

_	stration Section sion of Corporations		
SUBJECT:	Angler's Boutique Resort LLC (Name of Limit	ted Liability Company)	
Dear Sir or N	Madam:		
The enclosed	d Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.	
Please return	all correspondence concerning this ma	atter to the following:	
Marc	C Lawrence (Name of Person)	·	
660	Washington Avenue		
	(Address)		
Miam	Reach FL 3 (City/State and Zip Code)	33139	
For further in	nformation concerning this matter, plea	ise call:	
Mar	(Name of Person) at ((Area Code & Daytime Telephone Number)	
Regis Divis Clifto 2661	EET/COURIER ADDRESS: stration Section ion of Corporations on Building Executive Center Circle hassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:			
✓ \$2	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. Name of the limited liability company: Angler's Bo	outique Resort LLC
2. (a) Principal office address of limited liability compar (<i>Note: MUST BE STREET ADDRESS</i>)	Suite 300 Miani PL 33137
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SECRETAR ALLAHASS
3/22/06	L06000030553 = =
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of State:
Registered Agent:	BSPA Corporate Services, Inc.
Registered Office Address:	350 E. Las Dlas Blvd Suite 1000 Et. Lauderdale, FC 33301
(b) Enter name of NEW Registered Agent and/or NEW Registered Agent:	EW Registered Office address: Marc Lawrence
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Miani Banch, JFL 33139 FL
If the limited liability company is not organized under the that after the change or changes are made, the Florida strooffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.	eet address of the registered office and the business case of a Florida limited liability company, it is
(Signature of a member or authorized representative of a member)	<u></u>
(Printed or typed name of signee)	_
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pam familiar with and accept the obligations of my positio F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notification. (Signatury of Registered Agent)	agree to act in this capacity. I further agree to proper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby ed in writing of this change.
(Signature of Registered Agent)	