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SECRETARY OF STATE
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MAR 01 2016 S. YOUNG

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COVER LETTER

Division of Corporations	
3200 Ocean 203, LLC SUBJECT:	
	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	ange and fec(s) are submitted for filing.
Please return all correspondence concerning this matter	er to the following:
Lindsay Miller	•••
Name of Person	
Linder Law Group	
Firm/Company	
1111 Brickell Ave Suite 2200	
Address	
Miami, FL 33131	
City/State and Zip Code	ALLEN AVE
Lindsay@linderlawgroup.com	
E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matter, please	e call:
Lindsay Miller	305-717-7100
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amou	nt:
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

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.

l. Na	me of the limited liability company: 3200 Ocean 20)3, LL	С				
2. (a)				1111 Brickell Ave #2200 Miami, FL 33131			
. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	11/16/2006	-	 L0:	600011			
3.	Date of filing/registration in Florida	4.]	Document number		
5. (a)	Corpdirect Agents, Inc.						
	Registered Agent and Registered Office shown on the records of the		a Dej	ot. of State:			,
	1200 South Pine Island Road Miami, FL 33324					. 1 6	35EC
	Registered Office Address (MUST BE FLORIDA STREET AL	ODRES:	<u>S)</u>			E33	
	,FL					29 PH	1985 1987 1987
	Limited Agent Services, LLC					လုံး ∷	F10
(b)		P#*	1.1			بے. سے	THE STATE OF THE S
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	ince ac	ares	<u>s</u> :			
	1111 Brickell Ave Suite 2200 Miami, FL 3313	1					
	NEW Registered Office Address:			<u> </u>			
	, FL						
the cha agent v was/we	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cles of organization or the operating agreement of the liability and the street of the street of the street or the street of the street or the st	he regioility countries the linumited	ster omp nited liab	ed office cany, it is d liability ility com	and the business offichereby confirmed the company or as other pany.	ce of the at the ch	e registered ange(s)
	are of a member of authorized representative of a member	LIN	asa		, authorized rep. Printed or typed name of	rianaa	
I herel provisi the obl to here notified	by accept the appointment as registered agent and agree ons of all stanties relative to the proper and complete p igations of law position as registered agent as provided ely reflecte change in the registered office address, I he in writing of this change.	e to ac erform for in ereby c	t in lanc Cha confi	this capa	city I further agree:	to comp	ly with the and accept being filed as been

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