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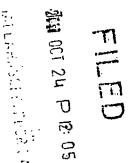
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

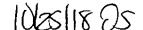
Office Use Only



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October 15, 2018

KATHY MORO 7805 SW 6TH COURT PLANTATION, FL 33324

SUBJECT: SPRING HILL VENTURE, LLC

Ref. Number: L07000017222

We have received your document for SPRING HILL VENTURE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please type or print name of signee.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 618A00020964

(D)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTHFOR 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. Name of the limited liability company: <u>Spring Hill Venture, LLC</u>					
7	(a) ATTN: Lynda Watkins		(b) <u>SAMI</u>	2	
	(4)_	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 301 E LAS OLAS BLVD	(0) <u>07</u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		FT. LAUDERDALE, FL 33301			
		02/14/2007		L07000017222	
3.		Date of filing/registration in Florida	4.	Document number	
5.	(a)	CORPORATION SERVICE COMPANY Registered Agent and Registered Office shown on the records 1201 HAYS STREET Registered Office Address (MUST BE FLORIDA STREE			
		TALLAHASSEE ,	FL_32301		
	(b)	FRANK WEINBERG & BLACK P.L.			
	• ′	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office address:		
		7805 SW 6th Court		7 DCI 24 P	
		NEW Registered Office Address:		1700	
		C/O DAVID BLACK, ESQ.			
		PLANTATION	FL <u>33324</u>		
th ag w th	e cha gent v as/we e arti	mited liability company is not organized under the nge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member cles of organization or the operating agreement of the unit of a member or authorized representative of a member by accept the appointment as registered agent and a	of the registered of liability company, is of the limited liability on the limited liability of the liabi	fice and the business office of the registered t is hereby confirmed that the change(s) ility company or as otherwise provided in company. Firstesi re v Vf Printed or typed name of signee	
th to no	rovisi ve obl v mere otified	ons of all statutes relative to the proper and comple igations of my position as registered agent as providity reflect a change in the registered office address. I'm writing of this change.	te performance of 1. ded for in Chapter (ny duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed	

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