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. COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJI	8107 Pensacola Boulevard, LLC						
50202	Name of Limited Liability Company						
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.					
Please	return all correspondence concerning this ma	atter to the following:					
Amy	Harvey						
	Name of Person						
8107	Pensacola Boulevard, LLC						
	Firm/Company						
8107	Pensacola Blvd, Suite A						
	Address						
Pensa	acola, FL 32534						
	City/State and Zip Code						
amy@	amyharvey.com						
Е	-mail address: (to be used for future annual i	report notification)					
For fur	ther information concerning this matter, plea	ase call:					
Amy ł	Harvey a	850 572-8466					
	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 amount:						
	☑ \$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.

1. Na	ame of the limited liability company: 8107 Pensace	ola Bo	oul	evard, LL	.C	
2. (a)	8107 Pensacola Blvd, Suite A		(b)			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ '	(0)	N	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	8107 Pensacola Blvd, Suite A			8107 Pe	nsacola Błvd, Suite A	
	Pensacola, FL 32534	_	•	Pensaco	ola, FL 32534	
		_	-			
	06/04/2007		L	.0700005	58890	
3.	Date of filing/registration in Florida	4.			Document number	
5. (a)	Steven R Moorehead					
J. (u)	Registered Agent and Registered Office shown on the records of	the Flori	da I	Dept. of State	::	
	25 West Government Street					
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	25 West Government St.					
	Pensacola, FL	3250	2		SCC:	
(b)	Amy Harvey				APR 13	
Enter name of NEW Registered Agent and/or NEW Registered Office address: 8107 Pensacola Blvd. Suite A Pensacola, FL 32534						
	8107 Pensacola Blvd. Suite A					
	Pensacola , FL	3253	4			
signa I here provisi the obtion merinotifie.	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable and the identical of the case of a Florida limited liable and the identical of the members of icles of organization of the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agricultures of the proper and complete ligations of my position as registered agent as provided by reflect a change in their distered office address, I in writing of this change. Division of Corporations P.O. In the proper and complete ligations of the proper and complete ligati	the regability of the li limited AI ee to a perforing for interesty	gist con mit i lia my ct i man cor	ered office npany, it is ed liability ability com Harvey In this capa nce of my a napter 605 nfirm that i	e and the business office of the registered is hereby confirmed that the change(s) of company or as otherwise provided in apany. Printed or typed name of signce acity. I further agree to comply with the duties, and I am familiar with and accept of the limited liability company has been	
Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00						