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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Summit Point at	- MM 209, LCC ited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter	to the following:				
JULIE SCHULZ					
Name of Person					
SUMMIT GROUP MANAGEMENT, LLC					
Firm/Company					
3427 BANNERMAN ROAD, SUITE D2	208				
Address					
TALLAUACCEE EL 22212					
TALLAHASSEE FL 32312 City/State and Zip Code					
City/State and Zip Code					
julie.schulz@summitgroup.biz E-mail address: (to be used for future annual repor	1 notification)				
For further information concerning this matter, please ca	all:				
JULIE SCHULZ at (_850) _219-8207				
Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS:	MAILING ADDRESS:				
Registration Section	Registration Section				
Division of Corporations	Division of Corporations				
Clifton Building	P.O. Box 6327				
2661 Executive Center Circle	Tallahassee, Florida 32314				
Tallahassee, Florida 32301					
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.

		٠Λ ٠			
1. Name of the limited liability com	ipany: SUMMIX	401W	t at mm	1209, LI	<u> </u>
2. (a) 3427 BANNERMAN RO Principal office address of li . (Note: MUST BE ST	mited liability company	(b) <u>34</u>		N ROAD of limited liability co BE POST OFFICE	
_SUITE_D208_			JITE 105-428		
TALLAHASSEE FL	32312	<u>T7</u>	ALLAHASSEE F	L 32312	
6/13/20	007		_070000	062281	
3. Date of filing/registra	ation in Florida	4.	Document n	umber	
5. (a) SUMMIT GROUP INTE	PNATTONAT, MANAC	EMENT	TTC		
Registered Agent and Registered Of				5 26	
2.0.7.3 SUMMIT_LAKE_ Registered Office Address (MUS		DRESS)	<u></u>	17 JUN SEGRED VECAND	
SUITE 155					her California
_SUITE 135			····	黑土 3	
TALLAHASSEE	, FL	32317			; T;
				7: 5 E I A I	The state of the s
(b) Enter name of NEW Registered Ag				6	÷
Enter name of NEW Registered Ag	ent and/or NEW Registered O	ffice address:			
3427 BANNERMAN RONEW Registered Office Address:	DAD, SUITE D208				
TALLAHASSEE	, FL	32312			
If the limited liability company is not	organized under the laws	of the State	e of Florida, it is he	reby confirmed th	ngt after
the change or changes are made, the agent will be identical. Or, in the cas was/were authorized by an affirmative the articles of organization or the open changes.	Florida street address of the se of a Florida limited liab to vote of the members of the second seco	ne registered ility compa the limited	d office and the bus ny, it is hereby conf liability company or	iness office of the firmed that the ch	e registered ange(s)
/hul/h	1	CI	LAUDE R. WAL	KER	
Signature of a member or authorized repre-	entative of a member		Printed or type	ed name of signee	
I hereby accept the appointment as a provisions of all statutes relative to the obligations of my position as region merely reflect a change in the region of this change.	he proper and complete persistered agent as provided justered office address, I he	e to act in the erformance for in Chap reby confir	his capacity. I furth of my duties, and I ter 605, F.S. Or, if m that the limited li	er agree to comp am familiar with this document is ahility company i	ly with the and accept being filed has been
Signature of Registered Agent	<u>/</u>				