## 107000063317

(Requestor's Name)						
(Address)						
(Address)						
(City,	/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
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D. SCOTT JAN 6 2017



CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: January 3, 2017

Order#: 436548/010

Re: SALAMANDER INNISBROOK, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are  $\omega$  any problems or questions with this filing, please call our office.  $\omega$ 

INCA.XCOA

## 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	me of the limited liability company: SALAMANDER	NNISBE	ROOK, LLC	<u> </u>	
2.	(a)	36750 US HWY 19 N	_ (b	)		
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		PALM HARBOR, FL 34684	_			
		06/15/2007		L070000	63317	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	NRAI SERVICES, INC			_	
	` ,	Registered Agent and Registered Office shown on the records of the	ne Florida	Dept. of Stat	e:	
		1200 SOUTH PINE ISLAND ROAD				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
			· · · · · · · · · · · · · · · · · · ·		_	
		Plantation , FL_	33324		_	
	(b)	Corporation Service Company				
	, , ,	Enter name of NEW Registered Agent and/or NEW Registered (	Office add	<u>lress</u> :		
					Eg y T	
		1201 Hays Street				
		NEW Registered Office Address:				
					Ser w	
		Tallahassee , FL_	32301		- 5元 <b>3</b>	
the ag wa	e cha ent w is/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited liate authorized by an affirmative vote of the members of organization or the operating agreement of the law.	the regis bility co the lim imited l	stered offic ompany, it i ited liabilit iability cor	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in	
	Signat	use of amember or authorized representative of a member	3111 (	omin, Addic	Printed or typed name of signee	
pr the to no	ovisti e obli mere tifice	by accept the appointment as registered agent and agreems of all statutes relative to the proper and complete is gations of my position as registered agent as provided by reflect a change in the registered office address, I have it in writing of this change in the registered of the company of Registered Agent Corporation Service Company	performa for in C ereby co	ance of my Chapter 60. Onfirm that	pacity. I further agree to comply with the	

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