

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(* 1.2		
	,	
(City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(50	iomoso Emily Hui	110)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	
Operational to Filing Officer.		





10/28/13--01019--013 **25.00



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.5 liability company submits the following statement in order agent, or both, in the State of Florida.	08, Florida Statutes, the undersigned limited er to change its registered office or registered
1. Name of the limited liability company: 5AX H	OLDINGS LLC
2. (a) Principal office address of limited liability company	y: 3700 ISLAND BLUD PH
(Note: MUST BE STREET ADDRESS)	AUENTURA, FL 33160
(b) Mailing address of limited liability company:	3700 ISLAND BLUD, PH.
(Note: MAY BE POST OFFICE BOX)	AVENTURA, FL 33/60
07/09/2009 3. Date of filing/registration in Florida	L0900066423 4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	BMith, CHAPMAN ESQ
Registered Office Address:	2699 Stipling Rd., A201
	FORT LAUDERDALE, FL 3331
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	ANN M. SAX - OPPENHEIM
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3700 ISLAND BWB - PH. 8
	AUENTOKA ,FL 33160
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the imited liability company. Signature of a member or authorized representative of a member	florida street address of the registered office tical. Or, in the case of a Florida limited) was/were authorized by an affirmative vote rwise provided in the articles of organization y.
	10/17/2012
Printed or typed name of signee Ann W Sax Uppenheim	10/15/2013
Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company. Signature of Registered Agent	10/15/2013 Fruther garee to

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