## L09000011848

(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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Special Instructions to Filing Officer:  Chs. Mgr Saddress  To Now PD Box.  Chayl.						

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BIVISION OF CORPORATION

M. MILLIGAN AUG 0 3 2017

## COVER LETTER

TO:	Registration Section Division of Corporations		1			
SUBJ	Ocean Place Holdings LLC		1			
		Name of Limited Liability Company				
Dear S	Sir or Madam:					
The er	nclosed Registered Agent/Registered Off	ice Change an	nd fee(s) are submitted for filing.			
Please	return all correspondence concerning th	is matter to th	e following:			
Cher	yl Collin					
	Name of Person	<del></del>				
Ocea	an Place Holdings LLC					
	Firm/Company					
PO E	30x 3031					
	Address					
Palm	Beach, FL 33480					
	City/State and Zip Code					
miss	cheryl72@yahoo.com					
1	E-mail address: (to be used for future ann	iual report not	ification)			
For fu	rther information concerning this matter,	please call:				
Cher	yl Collin	561	429-8477			
<del></del>	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	R D P	Registration Section Division of Corporations P.O. Box 6327 Callahassee, Florida 32314			
Enclosed is a check for the following amount:						
	☑ \$25 Filing Fee	<b>a</b> :	\$55 Filing Fee & Certified Copy			
INILICI	8 (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. N	lame of the limited liability company: Ocean Place	Holdi	ngs LLC	
2. (a)	)		(b)	
(1)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	327 Dyer Road		PO Box	3031
	West Palm Beach, FL 33405		Palm Be	ach, FL 33480
	7/27/2009	İ	£0900007	1848
3.	Date of filing/registration in Florida	4.		Document number
5. (a	Cheryl Collin - Mgr	,		
2, (	Registered Agent and Registered Office shown on the records of	the Flor	ida Dept, of State	::
	Jules Franco - Registered Agent			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	SSI	
	327 Dyer Road			. 9
	West Palm Beach	_3340	15	J VIST
	, , , ,		·	Story of the Control
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>			20
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	<u>1 Office</u>	address:	<b>3</b> 700
	327 Dren Rd.		1	AN D: 45
	NEW Registered Office Address:			55
			<u> </u>	
	West Palm Beach, FI	_3	3405	
the ch agent was/v	limited liability company is not organized under the la lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	f the re iability of the le limite	gistered office company, it is imited liability	and the business office of the registered hereby confirmed that the change(s) y company or as otherwise provided in
Sign	ature of a member of authorized representative of a member			Printed or typed name of signee
provis the ob to me	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I red in writing of this change.	ree to a perfor d for it hereby	ict in this cape mance of my a in Chapter 605 confirm that i	icity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been

Signature of Registered Agent