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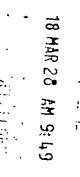
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## **COVER LETTER**

TO:

INHS18 (2/14)

Registration Section

**Division of Corporations** Sean of Miami Beach LLC SUBJECT: Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Michael Stein Name of Person Sean of Miami Beach LLC Firm/Company 556 Oak Ave Address Birmingham, MI 48009 City/State and Zip Code megtricho@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Dianne Rosenfeld Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount: **☑** \$25 Filing Fee ■ \$55 Filing Fee & Certified Copy

## 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.

I. Na	me of the limited liability company: Sean of Miami	LLC		
2. (a)	1674 Meridian Ave	į	<sub>(b)</sub> 556 Oa	ık Ave
z. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Miami Beach, FL 48009	<del>-</del>	Birming	ham, MI 48009
	09/10/2009		L090000	088414
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Sean Donaldson			
). (a)	Registered Agent and Registered Office shown on the records of th	e Flori	da Dept. of Sta	tte:
	5660 Collins Ave #186			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE.	<u>SS)</u>	
	Miami Beach FL	3314	0	- 88 - 184 - 2
(b)	Enter name of NEW Registered Agent and/or NEW Registered C	)ffice (	address:	Co
	1674 Kindia #100			61 65
	NEW Registered Office Address:  Many Blan, Hung	Ja		_
	, FL	3.	3140	_
the cha agent was/we was/we the art Signa I here provise the obt	imited liability company is not organized under the law ange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law ture of a member or authorized representative of a member obv accept the appointment as registered agent and agreeions of all statutes relative to the proper and complete pligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	the registry fithe limited	gistered officompany, it imited liabil d liability co	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany.  Printed or typed name of signee