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COVER LETTER

то:	Registration Section Division of Corporations	
SUBJF	ест: <u>РАИ МА</u> RY	MANAREMENT LLC ame of Limited Liability Company
	ir or Madam:	and of Emilied Elability Company
The en	closed Registered Agent/Registered C	II Office Change and fee(s) are submitted for filing.
Please	return all correspondence concerning	this matter to the following:
Ro	OCER PERRE-P Name of Person	40/
	CO Mile by Magacy.	
46	Firm/Company /	
<u></u>	AKEWORTH, FL	,
PH	City/State and Zip Code	e att. Net
	-mail address: (to be used for future a	inual report notification)
For furt	ther information concerning this matte	ar please call:
Re		at (561) 351–40 76 Area Code & Daytime Telephone Number
	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

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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 605.0 submits the following statement in order to Florida.	114 or 605.0116, Florida Statutes, the undersigned limited liability company change its registered office or registered agent, or both, in the State of
1. Name of the limited liability company:	PAUL MARY MANAGEMENT LLC.
2. (a) 40 Sth Terrace	outh (b) 4634 Weymouth Street
Principal office address of limited liab (<u>Note: MUST BE STREET AL</u>	
West Palmi Be	ach Lakeworth
FL 33411 (of	(address) # 33463
517.12.10	409000089868
3. Date of filing/registration in	Rlorida 4. Document number
TONIN PORCH	Florida 4. Document number
5. (a) 17/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/	alon the records of the Florida Dept. of State:
4700 SAUNINGAN Str	et Ho/ywood FL 33021
Registered Office Address (MUST BE FE	ORIDA STREET ADDRESS)
410 SELA TOVE	ree south
West Palm Bed	eh FL 33411
(b) Roger Pierre	Paul Es 2 7
Enter name of NEW Registered Agent and/o	TO Z
	ASSET ASSET
NEW Registered Office Address:	
4634 WEY	MOUTH SIREET 55 4
/ AK F NORH	ログママルイフ
	, rt <u>x 32 70</u> .3
If the limited liability company is not organize the change or changes are made, the Florida's	ed under the laws of the State of Florida, it is hereby confirmed that after treet address of the registered office and the business office of the registered
agent will be identical. Or, in the case of a FI	orida limited liability company, it is hereby confirmed that the change(s)
was/were authorized by an affirmative vote of	Fitha mambare of the limited lightlifty asymptotic and a structure of the limited lightlifty asymptotic and a structure of the limited lightlifty asymptotic and a structure of the limited lightlifty asymptotic and the structure of the structure
the articles of Greating appropriate operating appropriate operati	reement of the limited liability company of as otherwise provided in
Signature of a member or authorized representative of	
	11
r neredy accept the appointment as registered provisions of all statutes relative to the proper the obligations of my position as registered at the merely reflect a change in the registered of	agent and agree to act in this capacity. I further agree to comply with the fand complete performance of my duties, and I am familiar with and accept and complete for in Chapter 605, F.S. Or, if this document is being filed fice address, I hereby confirm that the limited liability company has been

Signature of Registered Agent