## L04000 105017

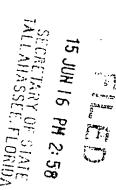
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## COVER LETTER

TO: Registration Section Division of Corporations	•					
Park Street Equity Partners, LLC						
	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:						
Andrea Nappi						
Name of Person						
Park Street Imports, LLC						
Firm/Company						
1000 Brickell Ave, Suite 915						
Address	<del> </del>					
Miami, FL 33131						
City/State and Zip Code						
compliance@parkstreet.com						
E-mail address: (to be used for future annu	al report notification)					
For further information concerning this matter, p	please call:					
Andrea Nappi	305 400-8324 ext. 507					
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					
INHS18 (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.	Na	me of the limited liability company:  Park Street Ed	quity Pa	artners, Ll	_C	
2	(a)	1000 Brickell Ave	(b	(b) 1000 Brickell Ave		
	(4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(0,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		Suite 915		Suite 91	5	
		Miami, FL 33131	<del></del>	Miami, F	L 33131	
		06/09/2015		L0900010	08017	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	Wolkov LLP				
٦.	(a)	Registered Agent and Registered Office shown on the records of t	the Florida	Dept. of State	::	
		1815 Purdy Ave			<b>.</b>	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		2	SECH ALLA	
		Miami Beach , FL	33139		JUN 16 PM 2: 58 CRETARY OF STATE LAHIASSEE, FLORIDA	
	(b)	Andrea Nappi			F. 6 A. L.	
	(-)	Enter name of NEW Registered Agent and/or NEW Registered Office address:		2: <b>5</b>		
		1000 Brickell Ave			DA G	
		NEW Registered Office Address:				
		Suite 915				
		Miami , FL	33131			
th ag wa	e cha ent v as/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regisability co of the lim limited l	stered office ompany, it is lited liability liability com	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.	
_			<u>Chr</u>	ris Mehrin	ger, Managing Member	
(		ture of a member or authorized representative of a member	4		Printed or typed name of signee	
pr th to	ovisi e obl mer	by accept the appointment as registered agent and agrons of all statutes relative to the proper and complete igations of my position as registered agent as providedly reflect a change in the registered office address, I did no writing of this change.	ee to act perform d for in C hereby co	t in this cape ance of my c Chapter 605 onfirm that i	acity. I further agree to comply with the duties, and I am familiar with and accept . F.S. Or, if this document is being filed the limited liability company has been	
Š	gnatu	of Registered Agent				