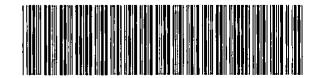
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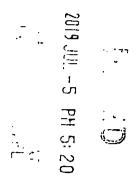
(Requestor's Na	ime)
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PICK-UP WAI	T MAIL
(Business Entity	y Name)
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Certified Copies Certifi	cates of Status
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R. WHITE JUL 1 6 2019

COVER LETTER

TO: Registration Section Division of Corporations		
PMC NORTH SHORE, L	LC	
	Name of Limited I	Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and	d fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to the	e following:
Spencer Angel		
Name of Person		
Firm/Company		
11211 SW 152ND ST		
Address		
Miami, Florida 33157		
City/State and Zip Cod	le	
sangel@ppmcr.com		
E-mail address: (to be used for future	annual report noti	fication)
For further information concerning this made	tter, please call:	
spencer angel	305	255-1355
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.	egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314
Enclosed is a check for the follow	ing 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.

(a)	PMC NORTH SHORE, LLC	1	(b) PMC NORTH SHORE, LLC
(11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	'	Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)
	11211 SW 152nd street		11211 SW 152nd street
	Miami, FI 33157		Miami, Fl 33157
	12/06/2010		L10000124979
	Date of filing/registration in Florida	4.	Document number
(a)	Spencer Angel		
	Registered Agent and Registered Office shown on the records	of the Flori	rida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET) 80 S.W. 8TH STREET, SUITE 2000	ET ADDRES	2019 JUL 13
	Miami	FL 33130	30
(b)	Spencer Angel		
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:		address: 57
	NEW Registered Office Address:		
	11211 SW 152nd street		
	Miami	_{FL} 3315	57
cha ent w s/we	mited liability company is not organized under the nge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited at the identical by an affirmative vote of the member class of organization or the operating agreement of	of the reg I liability or rs of the li the limited	egistered office and the business office of the region company, it is hereby confirmed that the change limited liability company or as otherwise provided liability company.
بمر		C.	Spencer Angel

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am Jamiliar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent