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(Requestor's Name)							
(Address)							
(Addiess)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP	WAIT MAIL						
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificates of Status						
Special Instructions to Filing Officer:							
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D. BRUCE MAY 08 2017

COVER LETTER

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TO: Registration Section Division of Corporations				
	ia Fire	51 UC Liability Company		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Off	fice Change an	d fee(s) are submitted for filing	<u>,</u>	
Please return all correspondence concerning the	is matter to the	e following:		
Charlotte Tilley				
Name of Person				
Law Office of Michael Tilley				
Firm/Company				
128 Wilderness Cay				
Address				
Naples FL 34114			Par M	
City/State and Zip Code			SECRET	П
Mike@MRTilley.com		,	TAR	
E-mail address: (to be used for future and	nual report noti	fication)	YOF	III
For further information concerning this matter	, please call:		FLOR WIND	
Charlotte	561	392-5707	₩ 12	
Name of Person		Area Code & Daytime Tele	phone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Ro D P.	egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314		
Enclosed is a check for the following	; amount:			
☑ \$25 Filing Fee	□ \$	555 Filing Fee & Certified Cop	у	

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.

I. N	ame of the limited liability company: Xenia First	LLC					
2. (a)			(b)				
(,	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	:	.,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	6400 nandrews one	Steet	łø				
	JN Randerdale 963	3309					
	12/15/2010		L1000012	28410			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)	InCorp Services, LLC						
J. (4.	Registered Agent and Registered Office shown on the record	ds of the Flo	rida Dept. of Sta	te:			
	17888 67Th Court North						
	Registered Office Address (MUST BE FLORIDA STRE	EET ADDR	ESS)	···			
	Loxahatchee	TO I	33470	ALLE SELECTION AND ALLE SELECTIO			
	LOXOTIOG	, FL		- £m ₹ T			
(b)	InCorp Services, Inc.			T INAY -			
(0)	Enter name of NEW Registered Agent and/or NEW Regist	tered Office	address:	m T			
	17888 67th Court North			D P P			
	NEW Registered Office Address:		_	- 2			
	Loxahatchee, FL 33470			> ••			
				_			
	Loxahatchee	, FL	33470	_			
the chagent was/w the ar Sign I herrorist the obtain notific	attre of a member or authorized representative of a member obly accept the appointment as registered agent and complications of all statutes relative to the proper and compligations of my position as registered agent as providing reflect a change in the registered office address in writing of this change. Jackie DeFilipp are of Registered Agent	ss of the red liability ers of the fine limited agree to bleie performed for ss. I herebyis on beh	egistered office company, it limited liability conditions act in this caparance of my in Chapter 60 y confirm that alf of InCorp	ee and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany. MIMAL TO THE PROVIDED THE PROVIDED TO THE PROVIDED THE			
U	Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00						