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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SEMPER	DYNAMICS LLC Tame of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
THEODORE M. I	DIXON
SEMPER DYNAM!	(S LLC
411 WALNUT ST	# 13131
GREEN COVE SPRING City/State and Zip Code	55, F-L 32043-3443
ted @ semper dyna E-mail address: (to be used for future a	innual report notification)
For further information concerning this matt	er, please call:
THEODORE M. DIXON	at (954) 695 8915 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 followi	្រ ng amount:
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy
	·

INHS18 (2/14)

1 STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections $60\frac{1}{5}$.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

Florida.						
1. Name of the limited liability company	: SEMPER	2 DYM	UDMICS	LLC		
2. (a) 411 WALNUT ST. Principal office address of limited (Note: MUST BE STREET)		(b)		dress of limited	liability compa	ıny:
GREEN COVE SPRING:	SI F-L		GREEN	COVE	SPRILLO	5, FL
3204	13 - 3443 13 - 3443				32043-	/
JAN_ (3, 201 3. Date of filing/registration	in Florida	4.		50000 ent number	5280	
	DIXON					
Registered Agent and Registered Office sh 2550 EISEN HOW! Registered Office Address IMUST BE	nown on the records of the	#8	, of State:			
FORT LAUDERDALE (b) THEODORE M Enter name of NEW Registered Agent and	DIXON			:	17 SEP 25 SECRETARY TALLAHASSE	FIL
Y WALNUT S	# (3	13.	_		5 AN ID: 05 FOF STATE EE, FLORIDA	FILED
GREEN COVE SPRI	NGS FL.	32043	- 34 43			
If the limited liability company is not orgathe change or changes are made, the Floricagent will be identical. Or, in the case of a was/were authorized by an affirmative votable articles of organization or the operating hoology. Signature of a member or authorized representative. I hereby accept the appointment as registed provisions of all statutes relative to the presentation of merely reflect a change in the registered to the registered to the presentation of this change.	la street address of the Florida limited liable of the members of the gagreement of the line of a member	the registered little compare the limited liability and little limited liability little littl	d office and the ny, it is hereby liability company ity company. EUDORE Printed of the company of the company.	business officonfirmed the sylver as other typed name of further garage.	ice of the regat the chang wise provid	gistered e(s) ed in

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00