L1100026188							
(Requestor's Name) (Address) (Address)	100273038241						
(City/State/Zip/Phone #)	05/18/1501047003 ★★25.00						
Certified Copies Certificates of Status	BIVISION IT SOLATE AND						
Office Use Only	C.L.9-15 5-19-15						

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: _____

Name 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:

CHRISTOPHER Y. MILLS

Name of Person

BUSCH WHITE NORTON, LLP

Firm/Company

505 S. FLAGLER DRIVE, SUITE 1325

Address

WEST PALM BEACH, FL 33401

City/State and Zip Code

CMILLS@BWNFIRM.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHRISTOPHER Y. MILLS	561 410-7195		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314		
Tallahassee, Florida 32301			
Enclosed is a check for the following an	nount:		
2 \$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.

	ame of the limited liability company: <u>CCFL 1 LL</u> 765 41st Street		765 41	st Street	u	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)			-
	Miami Beach, FL 33140 03/02/2011		Miami Beach, FL 33140			
			L11000026188			
3.	Date of filing/registration in Florida	4.		Document number		_
5. (a)	Joan Bennett					
J. (a)	Registered Agent and Registered Office shown on the records	of the Flor	da Dept. of St	ate:		
	765 41st Street					
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRE	<u>\$\$)</u>			ai N
	Miami Beach	_{FL} _3314	0		15 HAY	SECNE I
(b)	Christopher Y. Mills			_	12 1	
	Enter name of NEW Registered Agent and/or NEW Registe	red Office :	address:		PMI	i a Tri- Star
	Busch White Norton, LLP			_	12:27	
	NEW Registered Office Address:					*
	505 S. Flagler Drive, Suite 1325			_		
	West Palm Beach	_{FL_} 3340	1			
the cha agent v was/we	imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited cre authorized by an affirmative vote of the member icles of organization or the operating agreement of t	of the re liability rs of the l	gistered offi company, it mited liabil	ce and the business office of is hereby confirmed that the ity company or as otherwise	f the registere e change(s)	d
	Chit	С	atherine C	hassaignon 1		
Signa	ture of a member or authorized representative of a member			Printed on twoed name of signe	9	-

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 familiar 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

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

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