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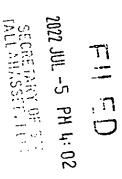
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COVER LETTER

Division of Corporations	
SUBJECT: 214 Glenwood LLC	
Nan	me of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.
Please return all correspondence concerning the	is matter to the following:
Melissa Jones	
Name of Person	
ZenBusiness Inc.	
Firm/Company	
336 E. College Ave. Suite 301	
Address	
Tallahassee, FL 32301	
City/State and Zip Code	
ra@zenbusiness com	
E-mail address: (to be used for future ann	nual report notification)
For further information concerning this matter,	, please call:
Melissa Jones	844 493-6249 at ()
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street. Suite 810
	Tallahassee. FL 32303
Enclosed is a check for the following	g 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: 214 Glenw	/00d	LLC			
-	(a)	1 BEAUFORT RISE	(b) 1 BEAUFORT RISE				
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ``	Ma	_	f limited liability company. E POST OFFICE BOX)	-
		WARRANDYTE VICTORIA	_	WARR	ANDYT	E VICTORIA	
		VICTORIA 3113, XX AUSTR-ALIA AU	_	VICTORI	A 3113, X	(X AUSTR-ALIA AU	_
		03/03/2011		L110000	026603		
3.	(a)	Date of filing/registration in Florida Registered Agents Inc.	4.	De	ocument nur	mber	_
٥.	(a)	Registered Agent and Registered Office shown on the records of th	e Florid	a Dept. of State:			
		7901 4th St N				75.0	
		Registered Office Address (MUST BE FLORIDA STREET AD STE 300	DDRES	<u></u>		12 Jul 12	
		St. Petersburg , FL	33702			-5 P	
	(b)	ZenBusiness Inc				PH 1:0	
	(0)	Enter name of NEW Registered Agent and/or NEW Registered C	Office ac	idress:		0	
336 E. College Ave.							
		NEW Registered Office Address:	· · ·	· · · · · · · · · · · · · · · · · · ·			
Suite 301							
		Tallahassee FL	32301				
cha age wa the	ange ent w s/we e arti	mited liability company is not organized under the laws or changes are made, the Florida street address of the r vill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egister ulity co the lin mited	ed office and the company, it is he control in the company of the	he business of ereby confin company or a iny	office of the registered med that the change(s)	<u>.</u>
		Chris Pasiopoulos	<u>Cr</u>	ris Pasiop			
In protection to	nerel ovisi obli nere tified	we of a member or authorized representative of a member by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ify reflect a change in the registered office address, I he fin writing of this change. The of Registered Agent	ortorm	t in this capaci	ty. I further	n familiar with and accent	•

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