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K.SALY EXAMINER FEB - 9

COVER LETTER

No. 1

то:	Registration Section Division of Corporations				
SUBJE	TES INVESTMENTS LLC				
SOBJE		Name of Limited Liability Company			
Dear Si	ir or Madam:				
The end	closed Registered Agent/Registered Office C	hange and fe	e(s) are submitted for filing.		
Please	return all correspondence concerning this ma	tter to the fol	lowing:		
NICO	LAS SIHA				
	Name of Person				
LEGA	LINC CORPORATE SERVICES INC.	ı			
	Firm/Company				
17350	STATE HIGHWAY 249				
	Address				
HOUS	STON, TX 77064				
	City/State and Zip Code				
SUPP	ORT@LEGALINC.COM				
E	-mail address: (to be used for future annual re	eport notifica	tion)		
For furt	ther information concerning this matter, please	se call:			
NICO	LAS SIHA	,713	478.1040		
	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	Regis Divisi P.O. I	LING ADDRESS: tration Section on of Corporations Box 6327 nassee, Florida 32314		
	Enclosed is a check for the following amount:				
	☑ \$25 Filing Fee	□ \$55 l	Filing Fee & Certified Copy		
INHS18	3 (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. Na 2. (a)	4525 SW 52nd Circle Unit 108		(b) 49703 PARKSIDE DR		
z. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(<i></i> _	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	OCALA, FL 34474	_	NORT	HVILLE, MI 48168	
	03/07/2011		L11000	028057	
3,	Date of filing/registration in Florida	4.		Document number	
5. (a)	USA-RA LLC				
,, (u)	Registered Agent and Registered Office shown on the records of 841 PRUDENTIAL DRIVE	the Floric	a Dept. of S		
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRES	<u>S)</u>	2016 FEB	
	JACKSONVILLE , FL	32207		_	
(b)	LEGALINC CORPORATE SERVICES INC.			Proposition Control	
(-)	Enter name of NEW Registered Agent and/or NEW Registered	Office ac	idress:		
	5237 SUMMERLIN COMMONS			<u> </u>	
	NEW Registered Office Address:				
	SUITE 400	···			
	FORT MYERS , FL	33907			
he chai gent w vas/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regional ability confirmation of the limited	stered offi ompany, it nited liabil liability co	ice and the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.	
- C1	Well In	NIC	COLAS		
l hereb rovision he obli o mere otified	are of a member or authorized representative of a member by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	ee to ac perform I for in vereby c	t in this ca cance of m Chapter 66 confirm tha	Printed or typed name of signee spacity. I further agree to comply with the y duties, and I am familiar with and accep, 05, F.S. Or, if this document is being filed at the limited liability company has been	