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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: _____

Name of Limited Liability Company

Dear Sir or Madam:

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The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

C. Ernest Edgar, IV

Name of Person

Atkins

Firm/Company

4030 W Boy Scout Blvd Ste 700

Address

Tampa, FL 33607

City/State and Zip Code

cnovoa@dtsgis.com

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

For further information concerning this matter, please call:

Cynthia Novoa	407 382-5222 at ()						
Name of Person	Arca 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 following	Enclosed is a check for the following amount:						
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy						

ENHS18 (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. N	ame of the limited liability company:	LC			
2. (a)		(ኩ)			
(-)	Principal office address of limited liability company. (New: MUST BE STREET ADDRESS)	(b)			
	3680 Avalon Park Blvd E, Ste 200	40	30 W Boy Scout Blvd,	Ste 700	
	Orlando, FL 32828	Tampa, FL 33607			
		L11	000035987		
3.	Date of filing/registration in Florida	4	Document number		
5. (a)					
	Registered Agent and Registered Office shows on the records o Data Transfer Solutions, LLC	f the Florida Dept	of State:	.	
	Registered Office Address (MUST BE PLORIDA STREET	ADDRESS	<u></u>	<u>6</u>	
	3680 Avaton Park Blvd E, Ste 200			NA F	
	Orlando , FL 3			FILI 17 29	
	Atkins NEW Registered Office Address 4030 W Boy Scout Blvd, Ste 700				
		_33607			
the char agent w was/wes the artic 	mited liability company is not organized under the la age or changes are made, the Florida street address o ill be identical. Or, in the case of a Florida limited li- re authorized by an affirmative vote of the members iles of organization or the operating agreement of the Management of a member	f the registered iability compar- of the limited l limited liabili Allen fbu	l office and the business of ay, it is hereby confirmed t iability company or as oth ty company. augh Printed or typed name of	flice of the registered that the change(s) erwise provided in of signes	
	y accept the appointment as registered agent and ag ns of all statutes relative to the proper and complete pations of my position as registered agent as provide by reflect a change in the registered office address. I in writing of this change.	ree to act in th performance o a for in Chapt hereby confirm	is capacity. I further agre of my duttes, and I am fam er 605, F.S. Or, if this doc a that the limited liability o	e to comply with the iliar with and accept sument is being filed sompany has been	

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

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