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. (Re	equestor's Name)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	dv.

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D. BRUCE FEB 13 2017



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	1200000001	95			
	REFERENCE	:	505276	4384197			
	AUTHORIZATION	:_(	Mad				
	COST LIMIT	زیر) )_:	\$ 25.00	ada			
ORDER DATE :	February 9, 2017						
ORDER TIME :	9:44 AM						
ORDER NO. :	505276-005				ALL	2017 FEB	
CUSTOMER NO:	4384197				LLAHASSE		
	<u>CHANGE OF A</u>	<u>GEN</u>	<u>r</u>	r -	PF STATE	0 A 8: 22	Ш П

• • • • • •

NAME: SISSER FAMILY LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

CONTACT PERSON: Melissa Zender -- EXT#

EXAMINER:

.

## 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.

2. (a)		_ (b)	)				<u>.</u>
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		]	Mailing address of I (Note: MAY BE			•
	2665 SOUTH BAYSHORE DRIVE SUITE 1200		2665 SO	UTH BAYSHOR	E DRIVE	SUITE	E 1200
	MIAMI, FL 33133		MIAMI, F	L 33133			<u> </u>
•	7/12/2011		L1100008	30701	_		
3.	Date of filing/registration in Florida	4.		Document num	ber		
5. (a)	CF Registered Agent, Inc.			_			
	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State	5:			
				-			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	<u>l</u>				
	2665 SOUTH BAYSHORE DRIVE SUITE 1200		···· -···	<del>.</del> .			
	MIAMI, FL	33133		_	AL	2017	
					ECRETARY LAHASSE	7 FEB	П
(b)	Corporation Service Company Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	ress:	-	ASS		
					m∼ mo	01	Ē
	1201 Hays Street				دی <del>تا</del> ایر <b>لی</b>	$\triangleright$	$\overline{\mathbf{n}}$
	NEW Registered Office Address:			- -	ORIDA	8:22	Ŭ
	Tallahassee, FL_	32301		_			
the cha agent w was/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	the regis bility co f the lim	tered office mpany, it is ited liability	e and the busine s hereby confirm y company or as	ss office of the state of the second se	of the ro he chan	egistere ge(s)
	/s/ Eric R. Sisser	SISS	SER, ERIC				
Signa	ture of a member or authorized representative of a member			Printed or typed n	ame of sign	iec	
I here	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p	ee to act performa	in this cape ince of my c	acity. I further a duties, and I am	agree to c familiar	comply with an	with the d accep
provisi the obi to mer	ions of all statutes relative to the proper and complete pligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change.	l for in C ereby co	hapter 605 infirm that	the limited liabi	s aocume. lity comp	any has	ing filea i been

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

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