211000111766

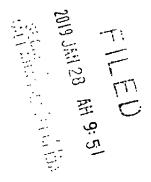
(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Dusiness Entity News)						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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JAN 29 2019 I ALBRITTON

COVER LETTER

TO: Registration Section Division of Corporations							
SUBJECT: COLICUS MONOGEMENT, LC 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:							
Sonathan ameron-Hayes Name of Person							
Calidus management, UC Firm/Company							
1555 Falm Peach Lather Blud #1500 Address							
West-Palm Beach, FL 33401 City/State and Zip Code							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please c	all:						
Samuel Carreron - Hayes at (561) (686-316) 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	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Enclosed is a check for the following amount:							
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy						

INHS18 (2/14)



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 11, 2019

JONATHAN CAMERON-HAYES 1555 PALM BEACH LAKES BLVD #1520 WEST PALM BEACH, FL 33401

SUBJECT: CALIDUS MANAGEMENT, LLC

Ref. Number: L11000111766

We have received your document for CALIDUS MANAGEMENT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 019A00000913

SECRETARY OF SHATE

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	ame of the limited liability company: Calidos	\mathcal{O}	magen	nent, LLC
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	— — —	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite 1526	_	Scrite	626
		West-PalmBeach, FL 33401	_	west "	Palm Beach, FL 33401
3.		Date of filing/registration in Florida	4.	LIIO	Document number
5.	(a)	Registered Agent and Registered Office shown on the records of the	e Flori	da D e pt. of Stat	_ e:
		NOSON, YEAGER Gresson white Registered Office Address (MUST BE FLORIDA STREET AL			<u>.</u> A.
		3001 PGA Blud Suite 301			-
		Palm Beach Grardens, FL		410	THE DESCRIPTION OF THE PARTY OF
	(b)	Enter name of NEW Registered Agent and/or NEW Registered O		ddress:	128 #
		1555 Palm Beach Lakes R NEW Registered Office Address:	<u>w</u> d		A 9. 51
		Suite 1520			- -
		West Palm Beach, FL	33	401	-
the age wa the	cha ent v s/we artí	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liability and the case of a florida limited liability of a member of the operating agreement of the liability of a member of a member of a member.	ne reg pility of the lin mited	istered office company, it is mited liability liability con	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
I h pro the to t	ierel ovisi obli nere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete point in the proper and complete point in the proper and complete point in the registered agent as provided poly reflect a change in the registered office address, I he did not the change.	e to ac	ct in this can	acity I further agree to comply with the

Signature of Registered Agent