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INHS18 (2/14)

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: Michael Evanoff Name of Person 5317 McIntosh LLC Firm/Company 5355 McIntosh Rd., Unit F Address Sarascta, FL 31233 City/State and Zip Code Miked evicson Inc. Com E-mail address: (to be used for future annual report notification) For further information concerning the matter, please call: Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount:	TO: Registration Division of	Section Corporations	
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Michael Evanoff Name of Person 5317 McIntosh LLC Firm/Company 5255 McIntosh Rd Unit F Address City/State and Zip Code Mike@evieson me.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount:	SUBJECT:	5377 McIntosh LL Name of Lim	C nited Liability Company
Please return all correspondence concerning this matter to the following: Michael Evanoff Name of Person 5377 McIntosh LLC Firm/Company 5355 McIntosh Rd. Unit F Address Sarasota, FL 34233 City/State and Zip Code Mikea Evieson line. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Nante of Person Area Code & Daytime Telephone Number Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount:	Dear Sir or Madam:		
Michael Evanoff Name of Person 5377 McIntosh, LLC Firm/Company 5355 McIntosh Rd, Unit F Address Sarasota, FL 34233 City/State and Zip Code Mikece eviesonine.com E-mail address: (to be used for future annual report notification) For further information concerning the matter, please call: at (941) 320.4176 Area Code & Daytime Telephone Number Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount:	The enclosed Regist	ered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
5377 McIntosh, LLC Firm/Company 5355 McIntosh Rd, Unit F Address Sarasota, Fl. 34233 City/State and Zip Code Mike@evieson me.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount: Enclosed is a check for the following amount:	Please return all corr	espondence concerning this matter	to the following:
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Trucked evies on line. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person	5377		
City/State and Zip Code The Content of Fermion The Content of Street Address: (to be used for future annual report notification) For further information concerning this matter, please call: At (941) 320 - 4716 Name of Person Area Code & Daytime Telephone Number	5355	McIntosh Rd. 1	<u>Init</u> F
For further information concerning this matter, please call: at (941) 320 · 4.76 Name of Person Area Code & Daytime Telephone Number Mailing Address: Registration Section Registration Section Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 Tallahassee, FL 32303 Enclosed is a check for the following amount:	Sar		33_
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Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount:			·
			2415 N. Monroe Street, Suite 810
S25 Filing Fee	Enclosed is	a check for the following amount:	:
	¥\$25 Filin	g Fee	□ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability co submits the following statement in order to change its registered office or registered agent, or both, in the State of F

t. Na	ume of the limited liability company: 53TI MCIntosh, LLC
2. (a)	5355 McIntoh Rd., Unit F Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX
	Sarasota, FL 34233 Sarasota, FL 342
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Thomas C. Tyler, Jr., PA Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Venuce, FL 34285 .FL
(b)	Michael Evanoff Enter name of NEW Registered Agent and/or NEW Registered Office address:
	5355 McIntosh Rd., UnitF NEW Registered Office Address:
	Sarasota, FL 34233
change agent v was/we	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that as or changes are made, the Florida street address of the registered office and the business office of the register will be identical. Or in the east of a Florida limited liability company, it is hereby confirmed that the changere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided to a granization or the operating agreement of the limited liability company.
Signa	ture of amember of authorized representative of a member Printed or typed name of signed
provisi the obl to men notified	by occept the appointment as registered eyent and agree to act in this capacity. I further agree to comply we out of all statutes relative to the propertind complete performance of my duties, and I am familiar with and it autions of my position as registered again as provided for in Chapter 605, F.S. Or, if this document is being by reflect a change in the registered office address, I hereby confirm that the limited liability company has a firm writing of this change.
Signatu HS18 (2/	Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00