L12000001717

(Re	questor's Name)				
(Address)					
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(City/State/Zip/Phone #)					
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(Document Number)					
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: March 25, 2015

Order#: 540425/002

Re: 5 STREET LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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	me of the limited liability company: <u>5 STREET, LLC</u>	<u> </u>		
2	(a)	7995 Mahogany Run Lane	(h	(b) 7995 Mahogany Run Lane	
۷.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0	Mailing address of limited liability comp (Note: MAY BE POST OFFICE BO	
		Naples FL 34113	_	Naples, FL 34113	
		01/04/2012		L12000001717	
3.		Date of filing/registration in Florida	4.	Document number	
5.	(a)	William G. Morris			
	.,	Registered Agent and Registered Office shown on the records of	the Florida	da Dept. of State:	
		247 N COLLIER BLVD, Suite 202			
		Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS	<u>SS)</u>	
					9
			·	<u> </u>	≤ sn
		Marco Island , FI	34145	15 AR	豆是
				~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	RET
	(b)	Corporation Service Company		7	공국류
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	ddress:	꽃무다
		1201 Hays Street		:20	岩
		NEW Registered Office Address:			蕉
		Negistrica Office Address.			
		Tallahassee , FI	32301)1	
the ag	e cha ent v as/we	mited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited libere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	f the reginability constants of the limited li	gistered office and the business office of the re company, it is hereby confirmed that the chan mited liability company or as otherwise provi	egistered ge(s)
_	Signa	urc f a member of authorized representative of a member	201	Printed or typed name of signee	 _
I pr th to no	herei ovisi e obl mere otifie	by accept the appointment as registered agent and agent of all statutes relative to the proper and complete igations of my position as registered agent as provide ity reflect a change in the registered office address, I in writing of this change.	e performed for in G hereby c	et in this capacity. I further garee to comply	with the ad accept ing filed a been