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## COVER LETTER 🔍

Division of Corporations	
SUBJECT: Tropical Resort Isl	and LLC ed 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:
Richard Venticingue Name of Person	
Tropical Resort Fsland L Firm/Company	<u>1</u> 2
5068 W. Ranger Street	<u>.                                    </u>
Beverly Hills Fl 34465 City/State and Zip Code	<u>&gt;</u>
Richard V & Hampalay, VV E-mail address: (to be used for future annual report	COM notification)
For further information concerning this matter, please cal	l:
Richard Venticinque at (35) 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:	
III \$25 Filing Fee	7 \$55 Filing Fee & Certified Copy

## 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: Tropical	Resi	27 tac	sland LLC		
	5068 W. Ranger Street Principal office address of limited liability company:		5068	W. Ranger Stalling address of limited lia	ability co	mpany:
	Beverly Huls F1 34465		Bove	(Note: MAY BE POST O		
						<del></del>
3.	3)20)14  Date of filing/registration in Florida	4.		Document number	<del></del>	
	United Steeks Corporation Age Registered Agent and Registered Office shown on the records of the	nte ,	Inc			
	13302 Winding Daks Court Registered Office Address (MUST BE FLORIDA STREET AL			•		
	Tampa F1 33612					
(b)	Richard Venticinque  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office Address:</u> , FL  Richard Venticinque  NEW Registered Office Address:	office addi	ess:	TALLAHASSEE, FLORID	16 JUN -6 PH 2: 05	
	Beverly Hells ,FL	341	165	<b>&gt;&gt;</b>		
the cha agent v was/we the arti Signal I herei provisi the obl to mere notified	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 in the case of a Florida limited liability in the case of a Florida limited liability in the authorized by an affirmative vote of the members of oles of organization or the operating agreement of the liability of a member of a member of a member of a member as registered agent and agree ons of all statutes relative to the proper and complete properties of my position as registered agent as provided by reflect a change in the registered office address, I have the properties of this change of the properties of the properties and the registered of the properties and the properties address, I have the properties of the	he regist bility con the limit mited lia	ered office npany, it is sed liability ability company chard	and the business office hereby confirmed that a company or as otherwise.  Denticinguard name of sucitive I further agree to	ee of the t the chavise pro	registered ange(s) vided in