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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Shelter Re	eal Estate Group, LLC - Change of Address  Name of Limited Liability Company
	Name of Elimited Elability Company
Dear Sir or Madam:	
The enclosed Registered Agent/R	Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence	concerning this matter to the following:
Chad M. E	Elliott
Name of Perso	on .
Shelter Real Estate	
P.O. Box 3	3315
Tampa, FL 336 City/State and Zip	
Chad@SHELTER E-mail address: (to be used for future	Rtampa.com annual report notification)
For further information concerning	ng this matter, please call:
Chad M. Elliott Name of Person	at ( 813 ) 951-0907  Area Code & Daytime Telephone Number
STREET/COURIER ADD Registration Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, Florida 32301	Registration Section Division of Corporations P.O. Box 6327
Enclosed is a check for t	he following amount:
\$25 Filing Fee	\$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 608.416 or 608.508, 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. Name of the limited liability company:Sh	nelter Real Estate Group, LLC		
2. (a) Principal office address of limited liability compa	ny: 111 N. 12th Street, Unit 1522		
(Note: MUST BE STREET ADDRESS)	Tampa, FL 33602		
(b) Mailing address of limited liability company:	P. O. Box 3315		
(Note: MAY BE POST OFFICE BOX)	Tampa, FL 33601-3315		
3/1/2012	L12000030300		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown of	n the records of the Florida Dept. of State:		
Registered Agent:	Chad M. Elliott		
Registered Office Address:	401 Channelside Walk Way #1284 Tampa, FL 33602		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u> <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address:  (MUST BE FLORIDA STREET ADDRESS)	Chad M. Elliott  111 N. 12th Street, Unit 1522  Tampa  Ft 33602		
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member			
Chad M. Elliott Printed or typed name of signee	<u> </u>		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my I Chapter 608, F.S. Or, if this document is being filed to a address, I hereby confirm that the limited liability compa	agree to act in this capacity. I further agree to oroper and complete performance of my duties, position as registered agent as provided for in herely reflect a change in the registered office ny has been notified in writing of this change.		

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