

(Requestor's Name)								
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PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
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R. WHITE

DEPARTMENT OF STATE

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ACCOUNT NO. : 12000000195									
REFERENCE : 211529 4311863									
AUTHORIZATION: Spelle Blens									
COST LIMIT : \$35.00									
ORDER DATE : July 10, 2014									
ORDER TIME : 5:06 PM									
ORDER NO. : 211529-010									
CUSTOMER NO: 4311863									
<u>CHANGE OF AGENT</u>									
NAME: DAYTONA ATLANTIC, LLC									
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:									
CERTIFIED COPY XX PLAIN STAMPED COPY									
CONTACT PERSON: Courtney Williams EXT# 62925									
EXAMINER:									

COVER LETTER

TO:	Registration Section Division of Corporations						
CUDI	DAYTONA ATLANTIC, LLC						
SUBJECT: Name of Limited Liability Company							
Dear 9	Sir or Madam:						
The er	nclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.					
Please	return all correspondence concerning this ma	atter to the following:					
na.	4.6.46.						
HIKI N	AcGettigan						
	Name of Person						
Blank	Rome LLP						
	Firm/Company						
One L	ogan Sq, 130 N 18th St						
	Address						
Philac	delphia, PA 19103-6998						
	City/State and Zip Code						
McGe	ettigan@BlankRome.com						
	E-mail address: (to be used for future annual)	report notification)					
For fu	rther information concerning this matter, plea	ase call:					
~~~	Name of Person	Area Code & Daytime Telephone Number					
	STREET/COURIER ADDRESS:	MAILING ADDRESS:					
	Registration Section	Registration Section					
	Division of Corporations	Division of Corporations					
	Clifton Building	P.O. Box 6327					
	2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314					
	Enclosed is a check for the following amo	ount:					
	□ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy					
INHSI	8 (2/14)						

## 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. N	ame of the limited liability company: Daytona Atlant	tic, LLC					
2 (2)	3701 S. ATLANTIC AVENUE	(b)	3701 S.	. ATLANTIC AVENU	JE		
<i>2.</i> (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)				
	DAYTONA BEACH SHORES, FL 32118		DAYTON	A BEACH SHORES	s, FL 32	118	
	04/13/2012		L1200005	1182	. 4. 4		
3.	Date of filing/registration in Florida	4.		Document number			
5. (a	HOOPER, MARILYN						
	Registered Agent and Registered Office shown on the records o	f the Florida	Dept. of State	· ::			
	3701 S. ATLANTIC AVENUE						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)					
					5-1		
	DAYTONA BEACH SHORES , F	L 32118			11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
					#.[]#* 	Ş 1	1
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	d Office add	rpss'		* .44	Ţ.,-	
	Enter panie of NEW Registered Agent and on NEW Registere	d tymict add	1610.		· , ,		, 1
	1201 Hays Street				7	: :	.,
	NEW Registered Office Address:				2	ÇĐ	
						(,s	
	Tallahassee , F	L32301					
the ch agent was/w the ar	limited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited la ere authorized by an affirmative vote of the members idles of organization or the operating agreement of the	of the registiability control of the limited li	ered office npany, it is ted liability	and the business of thereby confirmed y company or as oth apany.	ffice of that the	the regi	istered (s)
	ature of a member or authorized representative of a member			Printed or typed name	of signee		
provis the ob to mer	by accept the uppointment as registered agent and ag ions of all statules relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, I d in writing of this change.	e performa ed for in C Thereby co	nce of my a hapter 605 nfirm that i	tuites, and I am fan , F.S. Or, if this do the limited liability	e to cor tiliar wi cument compan	nply wi th and is being y has b	th the accept g filed eeen
8	mile Hage	E	mily!	Gray			
Signat	ire of Registered Lean Corporation Service Company	BY:	l teef	Gray			
	Division of Corporations • P.O. FILING I	Box 6327 FEE: \$25.6		see, FL 32314			