L12000053969

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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Spinner Dol Name of L	inlited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.			
Please return all correspondence concerning this matt	er to the following:			
JULIE SCHULZ				
Name of Person				
SUMMIT GROUP MANAGEMENT, LLC Firm/Company	<u>c </u>			
3427 BANNERMAN ROAD, SUITE	D208			
Address				
TALLAHASSEE FL 32312 City/State and Zip Code				
julie.schulz@summitgroup.bi E-mail address: (to be used for future annual re	z port notification)			
For further information concerning this matter, please	e call:			
JULIE SCHULZ at (350) 219-8207 Area Code & Daytime Telephone Number			
	·			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327			
2661 Executive Center Circle	Tallahassee, Florida 32314			
Tallahassee, Florida 32301	rananasse, rionaa 52517			
Enclosed is a check for the following amount:				
₩ \$25 Filing Fee	\$55 Filing Fee & Certified Copy			

INHS18 (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. Name of the limited liability con	opany: <u>Spinner</u>	Dolphin.	LLC
2. (a) _ 3427 BANNERMAN RO Principal office address of 1 (Note: MUST BE ST	imited liability company		RMAN ROAD dress of limited liability company: MAY BE POST OFFICE BOX)
SUITE D208		SUITE 105-4	128
TALLAHASSEE FL	32312	TALLAHASSEE	E FL 32312
3. Date of filing/registr	1) 1 2 ation in Florida 4	• •	000 5 3 9 6 9
5. (a) SUMMIT GROUP INTI Registered Agent and Registered Of			
_2073 SUMMIT_LAKE Registered Office Address (MU.	<u>ST BE FLORIDA STREET ADD</u>		TAE
SUITE 155			
_TALLAHASSEE	, FL_3	231.7	
NEW Registered Office Address:	OAD, SUITE D208		M 7: 50
	, FL 3	2312	
If the limited liability company is no the change or changes are made, the agent will be identical. Or, in the car was/were authorized by an affirmative the articles of organization or the of Signature of a member or authorized representations of all statutes relative to the obligations of my position as reg to merely reflect a change in the regnotified in writing of this change. Signature of Registered Agent	Florida street address of the se of a Florida limited liability vote of the members of the erating agreement of the limited sentative of a member	registered office and the ty company, it is hereby e limited liability companited liability company. CLAUDE R. W Printed o	business office of the registered confirmed that the change(s) my or as otherwise provided in WALKER or typed name of signee