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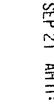
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SEURE DARY OF STATE
TALLAHASSEE, FLORIDA



SEP 22 2016 S. YOUNG

COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations		
SUBJE	SHORELINE PROPERTY	Y SERVICES	, LLC
	· · · · · · · · · · · · · · · · · · ·	ne of Limited L	iability Company
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered Off	fice Change and	fee(s) are submitted for filing.
Please	return all correspondence concerning th	is matter to the	following:
Chr	istopher Scicchitano		
	Name of Person		
Sho	oreline Property Services, LLC		
	Firm/Company		_
200	4 New Stonecastle Ter., #100		
	Address		
Win	ter Park, FL 32792		
	City/State and Zip Code	·-	
Chr	is@shorelinepropertyservices.ne	t	
E	-mail address: (to be used for future ann	nual report notif	ication)
For fur	ther information concerning this matter	, please call:	
Chri	istopher Scicchitano	337	296-0417
	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	Re Di P.G	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314
	Enclosed is a check for the 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 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: Shoreline Property of the limited liability company:	•	_				
2	(a)	2004 New Stonecastle Ter., #100	(b) 2004 New Stonecastle Ter., #				., #1 0 0)
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ '	,		Mailing address of limited li (Note: MAY BE POST O	iability co	mpany:
		Winter Park, FL 32792	_		Winter P	Park, FL 32792	···	
		07/11/2012	_	_		L12000091045		
3.		Date of filing/registration in Florida Christopher Scicchitano	4.			Document number		
5.	(a)	Registered Agent and Registered Office shown on the records of the 105 Five Islands Blvd. #102	e Flori	da	Dept. of State	- e:		
		Registered Office Address (MUST BE FLORIDA STREET A) Panama City Beach, FL 32407	DDRES	<u>(SS)</u>		TALLAS SECTION		
						-	SEP 21	HASSE
1	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u> 2004 New Stonecastle Ter., #100	Office a	dd	ress:	-	AH 11: 16	
		NEW Registered Office Address: Winter Park, FL 32792				. -		
		, FL				-		
the age wa	cha ent v s/we	imited liability company is not organized under the law- inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li-	he reg bility (the li	gisi cor mi	tered office mpany, it is ted liability	e and the business offices s hereby confirmed that y company or as other	ce of the it the ch	registered ange(s)
	$\mathbb{C}^{\mathbb{C}}$	historia Scientino	(Ct	ristophe	r Scicchitano		
- 5	igna	ture of a member or authorized representative of a member				Printed or typed name of	signee	
pro the to	ovisi obl mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I ha d in writing of this change.	e to a perfori för in ereby	ct na C co	in this cap nce of my hapter 605 nfirm that	acity. I further agree t duties, and I am famili 5, F.S. Or, if this docu the limited liability co	to compl ar with ment is l mpany h	ly with the and accept being filed as been
Sig	gnatu	re of Registered Agent						