L12 000 138738

(Requestor's Name)					
(Address)					
·					
(Address)	-				
(City/State/Zip/Phone #)					
(GRyState/Zipir Hone #)					
PICK-UP WAIT	MAIL				
(Business Entity Name)					
	<u> </u>				
(Document Number)					
Certified Copies Certificates of Sta	tus				
Special Instructions to Filing Officer:					
	-				

Office Use Only



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COVER LETTER

	egistration Section livision of Corporations		•
SUBJEC			
	N.	ame of Limit	ted Liability Company
Dear Sir o	or Madam:		
The enclo	sed Registered Agent/Registered C	office Change	e and fee(s) are submitted for filing.
Please ret	urn all correspondence concerning	this matter to	o the following:
Laura Har	dy		
	Name of Person		
O'Hara Pa	rtners LLC		
	Firm/Company		
151 N Ma	itland Ave., Suite 947701		1.5207
<u>.</u>	Address		
Maitland,	FL 32751		71) 10: 5
	City/State and Zip Code		
lauralh@n	nac.com		 50
É-m	ail address: (to be used for future a	nnual report	notification)
For furthe	r information concerning this matte	er, please call	1:
Laura Hare	dy	407 at (448-0777
	Name of Person		Area Code & Daytime Telephone Number
R D P.	lailing Address: egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
E	nclosed is a check for the followin	ig 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.	Na	ame of the limited liability company:	LLC				
2.	(a)	151 N Maitland Ave.		(b)	151 N Ma	itland Ave.	
	` /	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	·- 	(0)		Mailing address of limit	
		Suite 947701			Suite 9477	01	
		Maitland, FL 32751			Maitland, I	FL 32751	
		11/01/2012		I.	.120001387	738	
3.		Date of filing/registration in Florida	_ 	_		Document number	
5.	(a)	WYLIE & ASSOCIATES LLC					-
J. (a)	(-)	Registered Agent and Registered Office shown on the records of 1601 PARK CENTER DRIVE	- ::				
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				-	202
		Suite 6A					2020 FT '1
						-	
		ORLANDO, FL	32835				24
	(b)	Laura Hardy				<u>:</u> =	
	` .	Enter name of NEW Registered Agent and/or NEW Registered	gent and/or NEW Registered Office address:			-	: 50
		151 N Maitland Ave.					
		NEW Registered Office Address:					
		Suite 947701					
			·		-		
		Maitland	32751				
age was the	nt w s/we artic gnate ereb visic oblinere	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of organization or the operating agreement of the law of a member or authorized representative of a member of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	registe ability c of the lift limited La	red com mite liat ura	office and pany, it is ed liability bility comp Hardy	the business office hereby confirmed to company or as oth pany. Printed or typed name	of the registered that the change(s) erwise provided in
Sign	nabur	of Registered Agent					
- 6	.a.ui	CONCESSION O					