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LLC REGISTERED AGENT CHANGE THE KNOWLES GROUP, LLC

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MAY 3 1 2017



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(((H 17000145669 3)))

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursium 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. 1	Name of the limited liability company: The Knowles	s Group, LLC			
2. (a	1101 Miranda Lane	(b)			
. , .	Principal office address of limited liability company:	_ (*/	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)		
	(<u>Now: MUST BE STREET ADDRESS)</u> Kissimmee, FL 34741				
	resonante de la contraction de	<u> </u>			
	12/12/2001	, 450 -	L13000015409		
3.	Date of filing/registration in Florida	4.	Document number		
5. (8	Carla Tedrow				
	Registered Agent and Registered Office shown on the records of	llao Florida Dopt. o	- Sunta:		
	Registered Office Address MUST BE FLORIDA STREET A	Registered Office Address MUST BE FLORIDA STREET ADDRESS:			
	200 S Knowles Ave	•,		F., 2	
	Winter Park , FL	32789	·····	III III	- T1
(6	Swart Raumruk & Company 11 P		- 	2017 MAY 30 SECRETAR' TALLAHASS	
, ,	Enter name of NEW Registered Agent and/or NEW Registered	Office address:		2011 MAY 30 AM 9: SECRETARY OF STA FALLAHASSEE, FLOR	FU
	NEW Registered Office Address:			PAGE -	
	1101 Miranda Lane		-	Ş -	
	Kissimmee FL	34741			
the el agent was/v	limited liability company is not organized under the law range or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the registered of ability company of the limited lia limited liability	office and the business of this hereby confirmed to bility company of as oth company.	ffice of the regist that the change(s	ered)
- /	unite of a member or authorized representative of a member	Carla Te		- Problems	
			Printed or typed name		دامان
I her provi the of to me notifi	ely accept the appointment as registered agent and agressions of all statutes relative to the proper and complete poligations of my position as registered agent as privided rely reflect a change in the registered office address, I held in writing of this change.	ee to act in this performance of I for in Chapter sereby confirm	capacity. I further agre- my duties, and I am fam 505, F.S. Or, if this doc that the limited liability (e to comply with itlian with and ac cument is being f company has bee	the cept iled en
	/ Ban Oliver				
ວເສພ	tune of Reference Agent				

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

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