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(Re	questor's Name)	
(Ad	dress)	
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(Ad	dress)	· , , , , , , , , , , , , , , , , , , ,
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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10/02/14--01032--012 **25.00





CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard

llockar2@cscinfo.com

Date: September 30, 2014

Order#: 318603/059

Re: SFRO HOLDINGS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX __ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Lockard

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.

2234 Colonial Boulevard	(b)		
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of lim	nited liability company: OST OFFICE BOX)
Fort Myers, FL 33907			
04/19/2013	L	13000058332	
Date of filing/registration in Florida	4.	Document number	er .
Rajiv Patel			
		pt. of State:	
3343 State Road 7			
Registered Office Address (MUST BE FLORIDA STREET	'ADDRESS)		
Wellington	1 33449		
, 11	L	····	
Corporation Service Company			
Enter name of NEW Registered Agent and/or NEW Registered	d Office addres	5 :	- FR 8 m
			in to
NEW Registered Office Address:			
			\sim
Tallahassee , FI	լ_32301		
ange or changes are made, the Florida street address o vill be identical. Or, in the case of a Florida limited library authorized by an affirmative vote of the members of the operating agreement of the cure of amenber or authorized representative of a member by accept the appointment as registered agent and agreement of all statutes relative to the proper and complete	f the registere iability comp of the limited liability limited liability.	ed office and the business any, it is hereby confirmed liability company or as of lity company. Printed or typed name this capacity. I further age of my duties, and I am to	office of the registered d that the change(s) therwise provided in the of signee to comply with the uniliar with and accept
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Fort Myers, FL 33907 04/19/2013 Date of filing/registration in Florida Rajiv Patel Registered Agent and Registered Office shown on the records of 3343 State Road 7 Registered Office Address (MUST BE FLORIDA STREET) Wellington Full Myers Street NEW Registered Agent and/or NEW Registered Agent and/or NEW Registered Address: Tallahassee Full Myers Street Tallahassee Full Myers Street Address: Tallahassee Full Myers Street Address: Tallahassee Full Myers Address of a Florida limited 1 are authorized by an affirmative vote of the members cless of organization or the operating agreement of the Myers Address of all statutes relative to the proper and complete igations of my position as registered agent as provided by a registered agent as provided and registered agent as provided by a registered agent as provided and registered agent and registered agent as provided and registered agent and registered agent as provided and registered agent as provided and registered agent as provided and registered agent and registere	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Fort Myers, FL 33907 04/19/2013 L Date of filing/registration in Florida 4. Rajiv Patel Registered Agent and Registered Office shown on the records of the Florida Degastered Office Address (MUST BE FLORIDA STREET ADDRESS) Wellington , FL 33449 Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Office address 1201 Hays Street NEW Registered Office Address: Tallahassee , FL 32301 imited liability company is not organized under the laws of the Stange or changes are made, the Florida street address of the registered vill be identical. Or, in the case of a Florida limited liability company are authorized by an affirmative vote of the members of the limited cless of organization or the operating agreement of the limited liability company is not organized agent and agree to act in the registered agent and agree to act in the registered agent as provided for in Chagons of all statutes relative to the proper and complete performance in the registered agent as provided for in Chagons of all statutes relative to the proper and complete performance in the registered agent as provided for in Chagons of the proper and complete performance in the registered of the adpress. I hereby confile	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Fort Myers, FL 33907 04/19/2013 Date of filing/registration in Florida Rajiv Patel Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 3343 State Road 7 Registered Office Address Wellington FL 33449 Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Office address: 1201 Hays Street NEW Registered Office Address: Tallahassee FL 32301 imited liability company is not organized under the laws of the State of Florida, it is hereby onge or changes are made, the Florida street address of the registered office and the business will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed reauthorized by an affirmative vote of the members of the limited liability company or as of cless of organization or the operating agreement of the limited liability company. Printed or typed name of typed name of the printed or typed name of my position as registered agent and agree to act in this capacity. I further age on so of all statutes relative to the proper and complete performance of my duties, and I am fice advired to the proper and complete performance of my duties. And I am fice advired the propriet of the registered agent as provided for in Chapter 605, F.S. Or, if this a typerfect of change in the registered agent as provided for in Chapter 605, F.S. Or, if this a typerfect of a change in the registered agent as provided for in Chapter 605, F.S. Or, if this a typerfect of a change in the registered agent as provided for in Chapter 605, F.S. Or, if this a typerfect of a change in the registered agent as provided for in Chapter 605, F.S. Or, if this a change in the registered agent as provided for the chapter 605 and the firm of the chapter 605 and the provided for the chapter 605 and the chapter