11/29/16 01:52PM EST Hill Ward Henderson ->

Division of Corporations

8506176383 Pg 1

Page 1 of 2

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## LLC REGISTERED AGENT CHANGE AAA & D, LLC

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## 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	nme of the limited liability company: AAA & D, LLC	2		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)		
3. 5. (a)	May 9, 2013  Date of filing/registration in Florida  Tyler Hill	4.	Document number	
	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat  101 E. Kennedy Blvd.  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  Suite 3700			
(b)	Tampa ,FL Andrew J. Scaglione	33602	FILED 16 NOV 29 AM 8: 48 DIVISION OF CURA DESCRIPTIONS	
(0)	Enter name of NEW Registered Agent and/or NEW Registered 3802 Ehrlich Road	Office address:		
	NEW Registered Office Address: Suite 106			
	Tampa , FL	33624		
the cha agent v	imited liability company is not organized under the lavinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of the organization of the operating agreement of the	the registered of ability company of the limited lia	office and the business office of the registered to the registered to the change (s) the change (s) whility company or as otherwise provided in	
Sight	ture of a member or authorized representative of a momber	Andrew J	J. Scaglione, Manager Printed or typed name of signed	
I here provis the ob- to mer notifie	by accept the appointment as registered agent and agr look of all statutes relative to the proper and complete ligations of my position as registered agent as provide dy reflect a change in the registered office address, I i din writing of this thanke.	ree to act in this performance o d for in Chapter hereby confirm	capacity. I further agree to comply with the f my duties, and I am familiar with and accept r 605, F.S. Or, if this document is being filed that the limited liability company has been	
Signatu	Division of Corporations P.O. I	Box 6327● Tall	ahassee, FL 32314	

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