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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
/Bi	usiness Entity Nam	<u>e)</u>
(2)	ioniooo Emag (van)	- ,
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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FILED

15 MAY - 8 AM 8: 57

15 MAY - 8 AM 8: 57

Thange 05/19/15

COVER LETTER

TO: * Registration Section Division of Corporations			
SUBJECT: SLL (INCO Name o	RANCH, LLC f Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this m	natter to the following:		
Matthew Adler Name of Person			
SLL Cinco Ranch, Firm/Company	LLC		
6105 Pine Tree Dr.	ve		
Mianni Beach, FL City/State and Zip Code	33140		
Matthewadler Qamail. (E-mail address: (to be used for future annual	report notification)		
For further information concerning this matter, ple	ease call:		
	at (917) 843-5770		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314		
Tallahassee, Florida 32301	Talialiassee, Piolida 32314		
Enclosed is a check for the following 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.	Name of the limited liability company: SLC Cinco Ranch, LLC
2. (a	Mathew Adler (b) Mathrew Adler
	Principal office address of limited liability company: Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
	6105 Pine 1/ee Drive 6105 Pine Tree Drive
	Mizmi Beach, FL 33140 Migmi, Beach, FL 3317
	5/22/13 L13000074830
3.	Date of filing/registration in Florida 4. Document number
5. (a	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	<i>A</i>
	Tampa , FL 33612
(b	Matthew Adler
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	6105 Pine Tree Drive
	NEW Registered Office Address:
	Miami Beach, FI. 33140
	limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
	nange or changes are made, the Florida street address of the registered office and the business office of the registered
was/v	will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
the ar	ticles of organization or the operating agreement of the limited liability company.
Cin	nature of a member or authorized representative of a member Printed or typed name of signee
_	
provi the of to me notifi	eby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the sions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept bligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed rely reflect a change in the registered office address, I hereby confirm that the limited liability company has been en in the limited liability company has been
	Watther Hills
Signa	ture of Registered Agent