(Ře	equestor's Name)						
(Ad	ldress)						
(Ad	ldress)						
(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
(Bu	usiness Entity Nam	ne)					
(Document Number)							
Certified Copies	_ Certificates	of Status					
Special Instructions to	Filing Officer:						
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## COVER LETTER

Registration Section

TO:

**.\$**.

Division of Corporations							
DM84 ISLA BAHIA LLC	DM84 ISLA BAHIA LLC  Name of Limited Liability Company						
Name of							
Dear Sir or Madain:							
The enclosed Registered Agent/Registered Office C	Change and fe	ee(s) are submitted for filing.					
Please return all correspondence concerning this m	natter to the fo	ollowing:					
TINA GOFF							
Name of Person		_					
Sunshine State Corporate Compliance Co	mpany						
Firm/Company		<b>-</b> -					
3458 LAKESHORE DRIVE			:  :				
Address		~	-				
TALLAHASSEE, FL 32312							
City/State and Zip Code		_	- :				
SUNSHINECORPORATE2014@GMAIL.C	ОМ						
E-mail address: (to be used for future annual	report notific	ation)					
For further information concerning this matter, plea	ase call:						
TINA GOFF	850	656-4724					
Name of Person	(	Area Code & Daytime Telepho	one Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAI Regi Divi: P.O.	Stration Section sion of Corporations Box 6327 hhassee, Florida 32314					
Enclosed is a check for the following am	ount:						
S25 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	me of the limited liability company: DM84 ISLA	ВАН	IA	LLC		
2.	(a)		_	(b			
		Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)				Mailing address of limite (Note: MAY BE POS	
		84 ISLA BAHIA DRIVE			84 ISLA	BAHIA DRIVE	<u></u>
		FORT LAUDERDALE, FL 33316	<u> </u>		FORT L	AUDERDALE, FL	_ 33316
		MAY 23, 2013			L130000	75741	
3.		Date of filing/registration in Florida	_ 4.	•		Document number	
5.	(a)	SUNSHINE CORPORATE FILING OF FLO	RIDA	, IN	1C.		
	(,	Registered Agent and Registered Office shown on the records of 3458 LAKESHORE DRIVE	the Flo	orida	Dept. of Stat	-e:	
		Registered Office Address (MUST BE FLORIDA STREET	ADDR.	ESS	7	_ 	2019 SEP
		TALLAHASSEE · , FI	323	12		_ `. <sup>*</sup> .	る局部
(	(b)	Sunshine State Corporate Compliance Com	ompliance Company				AHTI: 4
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	1 Office	ado	iress:	_	11
		NEW Registered Office Address:				-	
		, FI				-	
age wa	cha ent w s/wc	mited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liber authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	f the re ability of the limite	the egis / co lim ed li	State of Flo tered office mpany, it i ited liabilit iability con	orida, it is hereby content and the business of s hereby confirmed to y company or as other and.	fice of the registered hat the change(s) erwise provided in
			_	H	RISTINA	B. GOFF, REG. A	
		ure of a member or authorized representative of a member				Printed or typed name of	J
the to i	obli nere	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change.	ree to perfo ed for t hereby	act rma in C y co	in this capt ince of my Chapter 605 onfirm that	acity. I further agred duties, and I am Jam 5, F.S. Or, if this doc the limited liability c	e to comply with the iliar with and accept ument is being filed company has been
Sig	natur	re of Registered Agent					