L13000093849

(Re	questor's Name)	<u> </u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	; #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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Office Use Only



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,,	COVER LETTER
TO: Registration Section Division of Corporations	
50202021	e Tuestments LLC of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Brett Roy Name of Person	
Sun Note Investor Firm/Company	netty LLC
1200 SE Brown Terr Address	
Deed, Ild Beh Fl City/State and Zip Code	- 33441
^ ^	al report polification)
For further information concerning this matter, p	•
Row Roy Name of Person	at (754) 367-2371 Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$25 Filing Fee

Enclosed is a check for the following amount:

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.

(a) .	Principal office address of limited liability cor (Note: MUST BE STREET ADDRESS	npany: 32446		Weekted Dh 321) ited liability company: OST OFFICE BOX)
	7-1-13		L13000093	749
	Date of filing/registration in Florida	4,	Document number	
(a)	Corporation Ser	VICE COM	LPany	
	Registered Agent and Registered Office shown on the			
	laus Haus St.			
	Registered Office Address (MUST BE FLORIDA	STREET ADDRESS)		
				E E m
	To lla baccas	3-7-2		20
	1a/la/jassee	, FL3230	2(_	· · · · · · · · · · · · · · · · · · ·
(b)				PN 2:
	Enter name of NEW Registered Agent and/or NEW	Registered Office address:		7 7 7
	REGISTERED AGENTS INC.			
	NEW Registered Office Address:	W		
	3030 N. Rocky Point Drive, STE 15	50A		
	Tampa	, _{FL_} 33607		
chai int w s/we	mited liability company is not organized und nge or changes are made, the Florida street a vill be identical. Or, in the case of a Florida re authorized by an affirmative vote of the modes of organization or the operating agreement.	ddress of the registered limited liability compa- nembers of the limited lent of the limited lent of the limited liability	d office and the business ny, it is hereby confirme liability company or as o	office of the registered d that the change(s) therwise provided in

Bill Havre/Assistant Secretary

Signature of Registered Agent