L/3000/17/07

(Re	questor's Name)						
,	,						
(Address)							
(6.4)	d						
(Ad	dress)						
(City/State/Zip/Phone #)							
PICK-UP	WAIT	MAIL					
(Business Entity Name)							
(Do	cument Number)						
Certified Copies	_ Certificates	s of Status					
Special Instructions to Filing Officer:							
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- Office Use Only							



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'JAN 23 2015 T. CARTER

COVER LETTER

Division of Corporations							
The Olofson-Ring Group, LL	The Olofson-Ring Group, LLC						
SUBJECT: Name	Name of Limited Liability Company						
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office	ce Change a	nd fee(s) are submitted for filing.					
Please return all correspondence concerning this	s matter to t	he following:					
Allen Ring							
Name of Person							
The Olofson-Ring Group, LLC							
Firm/Company	· · · · · · · · · · · · · · · · · · ·						
3620 Colonial Blvd. Suite 120							
Address							
Fort Myers, FL 33966							
City/State and Zip Code							
allen@oringrealty.com							
E-mail address: (to be used for future annu	ual report no	otification)					
For further information concerning this matter,	please call:						
Allen Ring	239	770-1825					
Name of Person	_ \	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					
Enclosed is a check for the following	amount:						
☑ \$25 Filing Fee	٥	\$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: The Olofson-R	ling G	<u> </u>	ıp, LLC		.	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b) _		Mailing address of limite		
	3620 Colonial Blvd. Suite 120		3	3620 Cd	olonial Blvd. Suite		
	Fort Myers, FL 33966	_	F	ort Mye	ers, FL 33966		
	08/19/2013		L.	130001 ⁻	17107		
3.	Date of filing/registration in Florida	4.	_		Document number		
5. (a)	OLOFSON-RING, ALLEN S						
J. (w)	Registered Agent and Registered Office shown on the records of the 707 WELLS AVE LEHIGH ACRES, FL 33972 Registered Office Address (MUST BE FLORIDA STREET AD 3620 Colonial Blvd. Suite 120	2		ept, of State	- e: -		
					_		
	Fort Myers, FL	33966	6		_	7A.C. SE	
(b)	Allen Ring				ECRETAR LLAHASS JAN 20		
(0)	Enter name of NEW Registered Agent and/or NEW Registered C	Office a	ddre	<u>:ss</u> :	-		
	Allen Ring				_	Y OF STATE EE.FLORID	
	NEW Registered Office Address:				: 36 : 36		
	3620 Colonial Blvd. Suite 120		.,	DA DA			
	Fort Myers , FL	33966	6				
the cha agent v was/we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the 1	s of the he registry of the line interest.	ne St giste com mite I lia	red office pany, it i ed liabilit	e and the business o s hereby confirmed y company or as oth	office of the registered that the change(s)	
Signa	ture of a member or authorized representative of a member			Tillig	Printed or typed name	of signee	
provisi the obl to mer	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ly reflect a change in the registered office address, I had in writing of this change.	ee to ac perforn for in ereby	ct ir man Ch con	this cap ce of my apter 605 firm that	acity. I further agre duties, and I am fan 5, F.S. Or, if this do the limited liability	ee to comply with the niliar with and accept cument is being filed company has been	
Signa	re of Registered Agent	>					
Jigitaku	Division of Corporations P.O. B	nv 431	77-	Tallaha	sean El 32214		

FILING FEE: \$25.00