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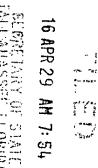




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MAY 02 2016 J SHIVERS



COVER LETTER

Division of Corporations					
SUBJECT: SAN-Q2 LLC Name of Limited Liability Company					
Name of 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 matter to the following:					
JONATHAN SILBERSTEIN Name of Person					
SAN-Q 2 LLC Firm/Company					
168 NORTH CATALINA AVE Address					
PASADEJA CA. 91106-1770 City/State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
ALYSSA HAKELEWERETTAL (850) 889-0310 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					

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	ı.	,	-27		6 ,	,
1. Na	me of the limited liability company:	BAN-G	2 1	LC		
2. (a)	Principal office address of limited liability con (Note: MUST BE STREET ADDRESS		(b) <u>16</u>	Mailing add	CATALIA / ress of limited liability AY BE POST OFFICE	company:
	PAJAMA CITY BEAC		ρ	ASADEN	IA CA	•
	FL 32408			9110	6-1770	
3.	Date of filing/registration in Florida				0001525	188
			•		nt number	_
5. (a)	SILVER STEIN, EYAL Registered Agent and Registered Office shown on the	- 1016 records of the FI		MFS State:	DAINE	UNST 297
	1016 THOMAS DRIVE Registered Office Address (MUST BE FLORIDA	UNIT Z STREET ADDI	? 97 RESS)			
	PAJAMA CITY BEA	aeit_				
	,	.FL	39408	7		
(b)	ALYSSA HAKENEWER Enter name of NEW Registered Agent and/or NEW J /// PALM BAY B2	T, 1] Registered Offic	PALM 1	BAX BLV	O. PANASSIA	7 32408
	NEW Registered Office Address:	_				The state of the s
	PANAMA CITY BE	FAC				San
	/	, FL3.	2408	>	が一	
the cha agent v was/wo	imited 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 lere authorized by an affirmative vote of the models of organization or the operating agreements.	ddress of the limited liabilitiembers of the	registered o ty company c limited lia	ffice and the l , it is hereby c bility compan	business office of confirmed that the	the registered change(s)

the articles of organization or the operating agreement of the limited liability company.						
	JONATHAN SILBERSTEIN					
Signature of a member or authorized representative of a member	Printed or typed name of signee					

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in withing of this change.

Signature of Registered Agent