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D. SCOTT



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 29, 2017

DESTINY BAYLOR
PARACORP INCORPORATED
2804 GATEWAY OAKS DR #100
SACRAMENTO, CA 95833

SUBJECT: SAM OF HEATHROW, LLC

Ref. Number: L14000006874

We have received your document for SAM OF HEATHROW, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

FORM MUST CONTAIN CURRENT REGISTERED AGENT ON LINE 5A

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren Regulatory Specialist II

Letter Number: 917A00026326

## COVER LETTER

TO: Registration Section Division of Corporations		l	
SUBJECT: Sam of Heathrow, LLC			
Nan Nan	ne of Limited Liability Compar	ny	
Dear Sir or Madam:		,	
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are subn	nitted for filing.	
Please return all correspondence concerning th	is matter to the following:		
Destiny Baylor			
Name of Person	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Paracorp Incorporated			
Firm/Company			
2804 Gateway Oaks Dr #100			
Address			
Sacramento, CA 95833			,
City/State and Zip Code		· · · · · · · · · · · · · · · · · · ·	
paracorp@myparacorp.com		9.2	
E-mail address: (to be used for future am	nual report notification)	O O	577
For further information concerning this matter	, please call:	2013 JIM TO A TO STATE LOAD	
Destiny Baylor	800 533-727	2	01
Name of Person		& Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADD Registration Sect Division of Corpo P.O. Box 6327 Tallahassee, Flor	ion orations	
Enclosed is a check for the following	g amount:	I	
<b>☑</b> \$25 Filing Fee	🗀 \$55 Filling 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.

I. Na	me of the limited liability company;	am of Heathrow	, LLC				
2. (a)	605 Commonwealth Ave		(b) 60	05 Comr	nonwealth	Ave	
2. (a)	Principal office address of limited liabili (Note: MUST BE STREET ADD		(-)			limited liability cor E POST OFFICE E	
	ORLANDO, FL 32803		0	RLANDO	D, FL 3280	)3	
	01/10/2014		<del></del>	_140000	n6874		···
3.	01/10/2014  Date of filing/registration in F	orida 4.			ocument nur	mber	
3.	Drosz, Andrew	<u></u>	•	v-		l	
	Registered Agent and Registered Office shown and Registered Office Address (MUST BE FLO			or state.			
		, FL	32	<u>303</u>		温量10	
(b)	Paracorp Incorporated  Entername of NEW Registered Agent and/or	NEW Registered Offic	e addres	<u>s</u> :			111
	155 Office Plaza Drive, 1st NEW Registered Office Address:	Floor				No. 7 To	: 0
	Tallahassee	, F1	32301				
the cha agent v	imited liability company is not organize ange or changes are made, the Florida st will be identical. Or, in the case of a Flo ere authorized by an affirmative vote of icles of organization or the operating ag	reet address of the orida limited liabili the members of the	register ty comp : limited	ed office a bany, it is l d liability	hereby confi- company or oany.	rmed that the ch	ange(s) ovided in
Siana	nure of a member or authorized representative of	a member				I name of signee	
I here provis the ob- to mer	by accept the appointment as registered ions of all statutes relative to the proper ligations of my position as registered ag ely reflect a change in the registered of d in writing of this change.	l agent and agree to r and complete perj ent as provided for fice address, I here	in Cha by confi	pter 605, irm that th	F.S. Or, if to ne limited lia	his document is bility company l	ly with the and accept being filed aas been
Signati	are of Registeral Agent	Vong: Assis	itan 1	Secry	etarg		
	Division of Corpor	ations • P.O. Box	6327•	Tallahass	ee, FL 3231	4	

FILING FEE: \$25.00