## 140000 13433

(Re	equestor's Name)		
(Ad	ldress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	· #)	
PICK-UP	WAIT	MAIL	
(Bu	isiness Entity Nam	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
		<u></u>	

Office Use Only



500330232065

06/12/19--01020--006 ••25.06



Y SULKER Jun 2 4 2019

## **COVER LETTER**

	Registration Section Division of Corporations		
SUBJEC	T: OCEAN VIEW V	ERO, LLC	
Name of Limited Liability Company			
Dear Sir	or Madam:		
The encl	osed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.	
Please re	turn all correspondence concerning thi	s matter to the following:	
	JOHN J. MCHUGH, JI	₹.	
<del>-</del>	Name of Person		
	ATTORNEY AT LAW		
	Firm/Company		
/	SSS INDIAN RIVER E	BLVD.	
	Address		
	VERO BEACH, FL	32960	
	City/State and Zip Code		
	NSZ@GMX.	4 <i>T</i>	
E-n	nail address: (to be used for future annu	ual report notification)	
For furth	er information concerning this matter,	please call:	
Jo	4N J. MC4UGH, JR.	at (772 ) 778 1100	
	Name of Person	Area Code & Daytime Telephone Number	
F C 2	Registration Section Division of Corporations Clifton Building 661 Executive Center Circle Callahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, Florida 32314	
F	Enclosed is a check for the following amount:		
į	\$25 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.

Fiorial.
1. Name of the limited liability company: OCEAN VIEW VERO, LLC
2. (a) 1555 INDIAN RIVER BLVD. (b) P. O. BOX 2807
Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
VERO BEACH, FL 32960 VERO BEACH, FL 32961
JAN 24, 2019 L/40000 /3 433  3. Date of filing/registration in Florida 4. Document number
JOHN J MCHUGU JR
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  2127 /074 A VEN UE
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
VERO BEACH FL 32960
, FL, FL
(b) JOHN J. MC4VG4, JK.
Enter name of NEW Registered Agent and/or NEW Registered Office address:
1555 INDIAN RIVER MAD BLVD. SULTE 125
NEW Registered Office Address:
VERO BEACH ,FL 32960
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registere agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
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 writing of this change.

INH\$18 (2/14)

Signature of Registered Agent