## L14000014618

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SECRETARI DA JULIA TALLAHASSEE, FLORIDA

MAY 02 2014 C. CARROTHERS

## **COVER LETTER**

Registration Section

TO:

Divi	ision of Corporations					
SUBJECT:	Suforia LLC  Name of Limited Liability Company					
SCHOLC1.						
Dear Sir or I	Madam:					
The enclosed	d Registered Agent/Registered Office	Change and fee(s) are submitted for filing.				
Please return	n all correspondence concerning this	matter to the following:				
Scott Mitc	hell					
	Name of Person					
Suforia, LI	LC					
<del></del>	Firm/Company					
	325 s Biscayne blvd - 2823					
	Address	<del></del>				
	Miami FI 33131					
	City/State and Zip Code					
scott@suf	foria.com					
E-mail	address: (to be used for future annua	l report notification)				
For further i	information concerning this matter, p	ease call:				
Scott Mitc	hell	917-545-5300				
	Name of Person	Area Code & Daytime Telephone Number				
Reg Divi Clif 266	REET/COURIER ADDRESS: distration Section ision of Corporations from Building 1 Executive Center Circle lahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enc	closed is a check for the following a	mount:				
□ \$	25 Filing Fee	□ \$55 Filing Fee & Certified Copy				
INHS18 (2/14	4)					

## 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. N	ame of the limited liability company: Suforia, LLC					
2. (a)	Suforia, LLC	(b)	(h) Suforia, LLC			
(_,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	325 S Biscayne Blvd - 2823		155 East	31st Street - 18S		
	Miami, FL 33131	· · ·	New York	k, NY 10016		
	01/27/2014	L	_14000014	4618		
3.	Date of filing/registration in Florida	_ <sub>4.</sub> -	]	Document number		
5. (a	Scott Mitchell					
J. (11)	Registered Agent and Registered Office shown on the records of	f the Florida	Dept. of State:	:		
	Suforia, LLC				•	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	325 S Biscayne BLVD - 2823			SEC	±.	
	Miami	33131		<b>全部</b>	P Th	
	` `	<u>.</u>			24	
(b)	Scott Mitchell			HS	9714 5 1 ±	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			50	AM C	
	Suforia, LLC			NDA.	: <del>.</del>	
	NEW Registered Office Address:					
	514 Grand Preserve Cove					
	Bradenton	<sub>L</sub> 34212				
If the	limited liability company is not organized under the la		State of Flor	rida, it is hereby confirm	ned that after	
the ch	ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited 1	of the regist	tered office	and the business office	of the registered	
was/w	ere authorized by an affirmative vote of the members	of the limi	ted liability	company or as otherwise	se provided in	
the ar	ticles of organization or the operating agreement of the	e limited li	ability com	· · ·		
Signature of a member or authorized representative of a member				Scott Mitchell Printed or typed name of signee		
I here provis the ob to me	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete obligations of my position as registered agent as provide rely reflect a change in the registered office address, le ed in writing of this change.	ree to act e performa ed for in C hereby co				
Signat	ure of Registered Agent					