(Re	questor's Name)							
(Ad	dress)							
(Address)								
(City/State/Zip/Phone #)								
PICK-UP	WAIT	MAIL						
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(Document Number)								
Certified Copies	_ Certificate:	s of Status						
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Office Use Only



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APR 0 7 2014 C. CARROTHERS



ION SERVICE COMPANY								
ACCOUNT NO. : 12000000195								
REFERENCE :								
AUTHORIZATION: Spullede man								
COST LIMIT : \$ 25								
ORDER DATE :								
ORDER TIME : 4:46 PM								
ORDER NO. : -005								
CUSTOMER NO:								
CHANGE OF AGENT								
NAME: HARLEY STREET LLC								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
CERTIFIED COPY XX PLAIN STAMPED COPY								
AA FIRTH STRUED COFT								
CONTACT PERSON: Susie Knight EXT# 52956								
EXAMINER:								

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: HARLEY STREE	TLLC	• • •			
2	(a)	L14000022375	_ (b	9)			
	(4)	Principal office address of limited liability company:			Mailing address of limited	d liability compar	ny:
		(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST	<u>r office box</u>))
		6018 S.W. 18TH STREET, SUITE C-1	-				
		BOCA RATON, FL 33433	_				·····
		2/7/14		L1400002	22375		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)	LEHMAN, RICHARD S					
٠,	(4)	Registered Agent and Registered Office shown on the records of th	e Florida	Dept. of State):		
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)							
		6018 S.W. 18TH STREET, SUITE C-1			નં		
		BOCA RATON ,FL_	33433	}			en fas
					5	APR :	(4 E. 1940)
	(b)	Corporation Service Company				SSE F	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office add	dress:	ŗ		DATE OF
					Ī	AH II: 08	Second !
		1201 Hays Street			•	新分 · · · · · · · · · · · · · · · · · · ·	
		NEW Registered Office Address:				<u>Σ</u> α	
				· . ·	•		
		Tallahassee, FL_	32301		_		
the ag	e cha ent v as/we	mited liability company is not organized under the law- nge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited liab- re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	the regist bility contains the lim	stered office ompany, it is lited liability	e and the business of s hereby confirmed the y company or as other	fice of the reg hat the change	istered (s)
		/s/ Michael Simcock	Mich	nael Simcoc			
	_	ure of a member or authorized representative of a member			Printed or typed name of	Ü	
pr the to	oviși 2 obl. mere	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	ee to act perform for in C ereby co	in this capa ance of my a Chapter 605 onfirm that i	duties, and I am fami i, F.S. Or, if this doc the limited liability c Harrv B. Dæv	iliar with and cument is being company has b r is	th the accept g filed seen
Si	gnatu	re of Registered Agent Corporation Service Company	BY:		Asst. Vice Presi	laeni	