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C. TEINIE VIOTT 5014

· COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: LRSB, LLC			
	e of Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this	s matter to the following:		
Brendan A. Barry			
Name of Person			

Firm/Company			
601 N. Federal Highway			
Address			
Pompano Beach, FL 33062			
City/State and Zip Code			
BBarry@shutts.com			
E-mail address: (to be used for future annu	ual report notification)		
For further information concerning this matter,	please call:		
Brendan A. Barry	_at (954) 847-3884		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314		
Enclosed is a check for the following	amount:		
\$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.

1.	Na	me of the limited liability company: LRS	В,	LLC		, <u> </u>	· · · · · · · · · · · · · · · · · · ·	
2.	(a)	Principal office address of limited liability company:		(b)		Mailing address of limited li		
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		\ 	N	Mailing address of limited li (Note: MAY BE POST O		
		601 North Federal Highway						
		Pompano Beach, FL 33062			·			
		5/2/14			L1400	00071694		
3.		Date of filing/registration in Florida	_	4.		Document number		
5.	(a)	Registered Agent and Registered Office shown on the records o	f the	e Florida Dept.	. of State	¥		
		Registered Office Address (MUST BE FLORIDA STREET	AD	DRESS)				
		200 East Broward Boulevard, Suite	2]	100		_		
		Fort Lauderdale , F	T	33301			7	AME S
		, ,	-				14 JUL	是是
	(b)	Enter name of NEW Registered Agent and/or NEW Registere					ည	學是
		Enter name of NEW Registered Agent and/or NEW Registere	<u>d O</u>	ffice address:			P#	2000 2000 2000
							بب	
		NEW Registered Office Address:				•	ၗ	E E
		601 North Federal Highway						• 1•
		Pompano Beach , F	L	33062				
the ag we the I in the to no	e cha ent was/we e arti Signal herei ovisi e obli mere tified	imited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited level authorized by an affirmative vote of the members cles of organization or the operating agreement of the manufacture of a member of authorized representative of a member of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I if in writing of this change. Division of Corporations • P.O.	of the liab of the	ne registered ility compathe limited liabil mited liabil to act in the erformance for in Chaptreby confirmation in the chaptreby con	d office ny, it is liability ity com ais cape of my c ter 605 m that i	e and the business offices hereby confirmed that y company or as otherwhynes. December of the property of the confirmed or typed name of security. I further agree that is, F.S. Or, if this document is the limited liability confirmed to the con	ce of the rest the chan wise provi	egistered ge(s) ded in
		FILING				, * * * *		