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Account Nur Phone	me:: REGISTERED AGENTS INC. mber:: 120090000081 : (307)200-2803 :: (855)330-1010		
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## 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: Live Oak	Asse	ets, Ll	LC	
2. (a)	1275 66TH ST N	(b	<sub>(b)</sub> 1275 66TH ST N		
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	· · · · · · · · · · · · · · · · · · ·	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	UNIT 49175	_	UNIT	49175	
	ST PETERSBURG, FL 33743	_	ST PE	TERSBURG, FL 33743	
	05/19/2014		_14000	0080357	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a	SMALL BUSINESS RESOURCES USA. INC.				
(	Registered Agent and Registered Office shown on the records of th	ie Florida	Dept. of St	ate.	
	1601 PARK CENTER DRIVE				
	Registered Office Address (MUST BE FLORIDA STREET A)	DDRESS.			
	SUITE 6A			- 100	
	ORLANDO , FL	32835		رة دي آ	
at- s	Registered Agents Inc.			Ü	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:				<del>-</del>	
	7901 4th St N			<u>, 11</u>	
	NEW Registered Office Address:			_	
	STE 300				
	312 300		· · · · · · · · · · · · · · · · · · ·	_	
	St. Petersburg ,FL	33702			
If the	limited liability company is not organized under the law.	s of the	State of F		
the ch agent was/w	ange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lial zere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the limited liab.	he regis bility co the lim imited li	tered offi mpany, it ted liabil ability co	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in	
k	ature of a humber or authorized representative of a member	— niie	y Park	Printed or typed name of signee	
I here provis the obto men notific	by accept the appointment as registered agent and agressions of all statutes relative to the proper and complete poligations of my position as registered agent as provided rely reflect a change in the registered office address, I have a provided by this change.  Bill Havre - Assistant use of Registered Agent	performa for in C ereby co	ince of m hapter 60 infirm tha	pacity. I further agree to comply with the	