## 4000152547

(R	tequestor's Name)			
(A	ddress)			
(A	ddress)			
(C	City/State/Zip/Phone	#) <sub>.</sub>		
PICK-UP	☐ WAIT	MAIL		
(E	Business Entity Nam	e)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



000298810420

000298810420 05/08/17--01046--019 \*\*25.00



D. SCOTT MAY 9 2017



CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: May 4, 2017

Order#: 617877/004

Re: FLORIDA LEADERSHIP, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ashley Jiminez

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our coffice.

INCA.XCOA

## 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: FLORIDA LEADI	ERSHIP,	LLC		
2. (a)	1730 SE 47TH TERRACE	(b)	1730 SE	E 47TH TERRACE	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)		failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	CAPE CORAL FL 33904	<del>-</del>	CAPE CC	DRAL, FL, 33904	
	09/29/2014		L1400015	2547	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	CT CORPORATION SYSTEM				
( )	Registered Agent and Registered Office shown on the records of th	e Florida l	Dept. of State:	:	
	1200 SOUTH PINE ISLAND ROAD				
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	PLANTATION ,FL	33324			
				<u> </u>	
(b)	Corporation Service Company				
` '	Enter name of NEW Registered Agent and/or NEW Registered C	office add	ess:		
				SSE OB E	
	1201 Hays Street				
	NEW Registered Office Address:			CFFLOR PH P	
				5	
	<u>Tallahassee</u> , FL_	32301			
the char agent w was/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of the of organization or the operating agreement of the li	he registe oility con the limit	ered office pany, it is ed liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
0' '	Xel E. Whee	Jill Ci		zed Person	
(	yee of a member or authorized representative of a member			Printed or typed name of signee	
provisio he obli o mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	e to act i erformai for in Ch ereby cor	n this capa nce of my d napter 605, nfirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	
Signatur	e of Registered Agent Corporation Service Company	BY: Gra	ice E. Kirb	by, Asst. Vice President	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00