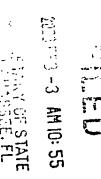
## L14000163313

(Requestor's Name)					
(Address)					
(Address)					
(Addless)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



800400521618



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	1200000001	95	
	REFERENCE	:	432082	7872917	
	AUTHORIZATION	:	Spulled	enan	,
	COST LIMIT	:	\$ 25.00		
ORDER DATE : Fe	ebruary 3, 202	<b>. .</b> 3			
ORDER TIME : :	L:21 PM				
ORDER NO. : 43	32082-005				
CUSTOMER NO:	7872917				
<b>-</b>	CHANGE OF				<b>-</b>
NAME:	141 DETOX IN	VEST	MENTS, LLC		
PLEASE RETURN TI	HE FOLLOWING A	s pr	OOF OF FILI	NG :	
CERTIFII XX PLAIN S	ED COPY CAMPED COPY				
CONTACT PERSON:	Alexxis Weila	and	EXT#		
			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	ame of the limited liability company: 141 DETOX IN	VESTMENTS, L	LC		
		(b)			
()	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)		
	2328 10TH AVE N STE 301	2328	2328 10TH AVE N STE 301		
	LAKE WORTTH BEACH, FL 33461	LAKE	E WORTTH BEACH, FL 33461		
	10/20/2014	L1400	0163313		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)					
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept. o	f State:		
	NASON, NATHAN E		<b>~</b> ~~		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)			
	3001 PGA BLVD #305				
	PALM BEACH GARDENS	The Address (MUST BE FLORIDA STREET ADDRESS)  LVD #305  TH GARDENS  FL 33410  EW Registered Agent and/or NEW Registered Office address:			
			-		
(b)		<u></u>	Ego é		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office address:	四 55		
	Corporation Service Company		***		
	NEW Registered Office Address:		<del></del>		
	1201 Hays Street				
	Tallahassee	32301			
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of the organization or the operating agreement of the	registered offic ability company of the limited lia limited liability	e and the business office of the registered, it is hereby confirmed that the change(s) bility company or as otherwise provided in company.		
	Timothy Doran	Timothy Do	oran, Manager		
	ture of a member or authorized representative of a member		Printed or typed name of signee		
provisi the obli to mere	by accept the appointment as registered agent and agrons 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. It is my it in writing of this change.	ee to act in this performance of d for in Chapter hereby confirm t	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed hat the limited liability company has been		
	nace Cokybly				
o (Kumin)	re of Registered Agent				