To: Par 2 of 3 6/12/3/17	Florida Department of State Division of Corporations Electronic Filing Cover Sheet	Kimberly Laugh				
	Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H17000157019 3)))					
	Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.					
	To: Division of Corporations Fax Number : (850)617-6383					
	From: Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (512)418-6949 Fax Number : (954)208-0845 'V'					
	Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.					
2: 52	LLC REGISTERED AGENT CHANGE	8				
	Certificate of Status 0					
-	Certified Copy 0 Page Count 02					
erecativ 2∰1 JUN I2 PH	Estimated Charge \$25.00					
	Etectronic Filing Menu Corporate Filing Menu Help	,				
	JUN 1 3 2017	7.				

٩,

, Ý

12122023573 From: Kimberly Laughrey

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

•

΄,

2017-06-12 12:50 26 CST

÷

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.

	Principal office address of limited liability company:	_	(b)	Mailing address of limit	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limit (Note: MAY BE PO	
	92 SW 3rd St., CU#6		92 SW 3	Brd St., CU#6	<u></u>
	Miami, FL 33130		Miami, 1	FL 33130	· · · · · · · · · · · · · · · · · · ·
	11/12/2014		L1400017	75220	
	Date of filing/registration in Florida	- 4.		Document number	
(a)					
(4)	Registered Agent and Registered Office shown on the records of t	he Flor	rida Dept. of S	tate:	
	Universal Registered Agents, Inc.		•		
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE	<u>(SS)</u>		29
	3458 Lakeshore Drive				
	Tallahussee , FL 32312			JUN 12	
	, fL	·····			SSE N
(b)					
(0)	Enternaine of NEW Registered Agent and/or NEW Registered 6	Office	1 1		331.
		<u></u>	naaress:		
	C T Corporation System	<u></u>	<u>augress</u> :		E FLORID
			<u>hugress</u> :	-	STATE S
	C T Corporation System		<u>haaress</u> :		STATE STATE
	C T Corporation System <u>NEW</u> Registered Office Addross: 1200 South Pine Island Road			 	STATE S
	C T Corporation System <u>NEW</u> Registered Office Addross: 1200 South Pine Island Road	33324			STATE S
e cha ent w is/we	C T Corporation System <u>NEW</u> Registered Office Addross: 1200 South Pine Island Road	33324 s of the the reg bility of the li imited	he State of F gistered offi company, it imited liabil d liability co	ce and the business of is hereby confirmed ity company or as oth ompany.	onfirmed that after ffice of the registered that the change(s)
e cha ent w is/we artic	C T Corporation System NEW Registered Office Address: 1200 South Pine Island Road Plantation mitted liability company is not organized under the law nge or changes are made, the Florida street address of trill be identical. Or, in the case of a Florida limited lial isre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited l	33324 s of the the reg bility of the li imited	he State of F gistered offi company, it imited liabil	ce and the business o is hereby confirmed ity company or as oth ompany. Do	infirmed that after ffice of the registered that the change(s) erwise provided in
e cha ent w is/we artic Signut	C T Corporation System NEW Registered Office Address: 1200 South Pine Island Road Plantation , FL_ 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 lial rere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited	33324 is of the bility of the li innited Ta	he State of F gistered offi company, it imited liabil d liability co ummy Toftere	ce and the business o is hereby confirmed ity company or as oth ompany. Do Printed or typed nume	onfirmed that after ffice of the registered that the change(s) erwise provided in
e cha ent w is/we artic Bignut hereb ovision oblignere	C T Corporation System NEW Registered Office Address: 1200 South Pine Island Road Plantation 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 liability re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liability 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 hill in writing of the entropy	33324 rs of the the reg bility of the li iinited <u>Ta</u> the to an perform for in pereby	he State of F gistered offi company, it mited liabil d liability co ummy Tofter to t in this ca mance of mance chapter of confirm tha	ce and the business o is hereby confirmed ity company or as oth ompany. Printed or typed name pacity. I further agree duties, and I am fam 05, F.S. Or, if this down it the limited liability	onfirmed that after ffice of the registered that the change(s) erwise provided in of signee
e cha ent w is/we artic Bignut hereb ovision colination mereb iffed	C T Corporation System NEW Registered Office Address: 1200 South Pine Island Road Plantation , FL_ 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 lial irre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the higher authorized representative of a member are out member or authorized representative of a member	33324 rs of the the reg bility of the li iinited <u>Ta</u> the to an perform for in pereby	he State of F gistered offi company, it mited liabil d liability co ummy Tofter to t in this ca mance of mance chapter of confirm tha	ce and the business o is hereby confirmed ity company or as oth ompany. Printed or typed name pacity. I further agree duties, and I am fam 05, F.S. Or, if this down it the limited liability	onfirmed that after ffice of the registered that the change(s) erwise provided in of signee
e cha cnt w as/we e artic Signation herebovisic cobligation merebovisic mere tifled T Co	C T Corporation System NEW Registered Office Address: 1200 South Pine Island Road Plantation 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 liability re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liability 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 hill in writing of the entropy	33324 rs of the the reg bility of the li iinited <u>Ta</u> the to an perform for in pereby	he State of F gistered offi company, it mited liabil d liability co ummy Tofter to t in this ca mance of mance chapter of confirm tha	ce and the business o is hereby confirmed ity company or as oth ompany. Printed or typed name pacity. I further agree duties, and I am fam 05, F.S. Or, if this down it the limited liability	onfirmed that after ffice of the registered that the change(s) erwise provided in of signee