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

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SECTLORY OF STATE

1.

COVER LETTER

TO: Registration Section Division of Corporations	•
SUBJECT: Ringling + Orange Name of Limited Li	上 <u></u> ability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and	fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	following:
Rebecca Hunzeker Name of Person	
Capstone Management LLC Firm/Company	
101 Paramount Drive Suite Address	160
Sarasota, FL 34232 City/State and Zip Code	
E-mail address: (to be used for future annual report notifi	cation)
For further information concerning this matter, please call:	
Rebecca Hunzeker at (941) Name of Person) 413- M しょ 8 Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	
☐ \$25 Filing Fee ☐ \$5	5 Filing Fee & Certified Copy

INHS18 (2/14)

[STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOT] LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability c submits the following statement in order to change its registered office or registered agent, or both, in the State of

. (a)	me of the limited liability company:	(b)				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	· ,	_	lress of limited IAY BE POST		
	101 Paramount Drive Suite 160	<u>1c\</u>	Paran	ount D)r: ue	ن کی
	Sarasota, FL 34233	500	a Scti	FL 3	423	J
	11/18/2014	L	14000	17912	L	
	Date of filing/registration in Florida 4.	·	Documer	nt number		
(a)	Cross Street Conferate Servi	(25)]	C			
. (a)	Registered Agent and Registered Office shown on the records of the Flo	orida Dept. of S	tate:			
	200 South Orange Ave	·				
	Registered Office Address (MUST BE FLORIDA STREET ADDR	(2.7.3)				
	registred Office Fouress and French Street French	LUM				
	Surasita FL	b4 3 36				
(b)	Kebecca Hunzeker			P.C.	202	
	Enter name of NEW Registered Agent and/or NEW Registered Offic	e address:			SE	
				,	١	-11
	101 Paramount Drive, Sui	42 160		\$5.55 \$5.55	V	
	NEW Registered Office Address:			25. 105.	<u> </u>	Ш
				7. 5. 71. S.	u ô	D
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				•	ა	
	Sarascta ,FL	34232		<u> </u>	ა	(a)

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

notified in writing of this change.