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SECRETARY OF STATE
TALLAHASSTET FLORIDA

J. HARRIS

COVER LETTER

INHS18 (2/14)

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.

1 101 141	u.						
1. Na	ame of the limited liability company: <u>Bathrey w</u>	Sheli	han	Invin New	PL	<u>.LC</u>	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)		SWAI AN Mailing address of lim (Note: MAY BE Po	ited liabil	lity com	pany:
	Palm City, Fl 24990	-	Palm	City FL 31	1990	·	
	-	-					
	6/21/16 12/22/14		114	1000 1940	17		
3.	Date of filing/registration in Florida	4.		Document number			<u> </u>
5. (a)	Registered Agent and Registered Office shown on the records of the I						
	Registered Office Address MUST BE FLORIDA STREET ADD	ORESS)		_			
	#221 E	<u>-</u> _					
	Palm Beach Gardens, FL	334	10	-	SECK	<u>र</u> ्ग	· -ije g
(b)	Gennard Irwin Jr. Enter name of NEW Registered Agent and/or NEW Registered Off	~		_		¥27	प्रे हैं एक्स
	Lines hame of NEW Registered Agent and/of NEW Registered Off	ice addr	<u>:35</u> :			GP#	-
	895 SW All American Blod NEW Registered Office Address:			_	OF STATE	9: 54	
					25		
	0 ,			_			
	Palmerty, FL_	3490	10	_			
If the li	, imited liability company is not organized under the laws o	of the S	tate of Fl	orida, it is hereby	confirm	ed that	after
the cha	inge or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabil	registe	red offic	e and the business	office o	of the r	egistered
was/we	ere authorized by an affirmative vote of the members of the cles of organization or the operating agreement of the lim	ie limite	d liabilit	y company or as o			
	sign of organization of the operating agreement of the film		•	• •	T. V.		
Signat	ture of a member or authorized representative of a member		<u>orning</u>	Printed or typed nan	ie of sign	ee	
provisi the obl to mere notified	by accept the appointment as registered agent and agree to ins of all statutes relative to the proper and complete per igations of my position as registered agent as provided for ely reflect a change in the registered office address, I here is in writing of this change.	to act in forman or in Ch eby con	this cap ce of my apter 60: firm that	acity. I further ag duties, and I am fo 5, F.S. Or, if this a the limited liabilit	ree to co miliar v locumer y compo	omply with an it is be any ha	with the ad accept ing filed s been
Signatur	ennand Clowin re of Registered Agent						