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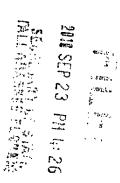
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M. MILLIGAN OCT 0 7 2016

COVER LETTER

Division of Corporations		
SUBJECT: ROMCREST L.L.C.		
Name of Limited Liability 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:		
ANTON SAMOLA Name of Person		
ROMCREST L.L.C. Firm/Company		
1350 MOHROE STREET, #869		
FORT MYERS, FL 33902 City/State and Zip Code		
TS @ ROMCREST. COM E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
ANTON SAMOILA at 757, 403-4126 Name of Person Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:		
\$25 Filing Fee & Certified Copy		

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. Name of the limited liability company:	ol L.L.C.
2. (a) 1350 MON (ROE STREET # 869 (b) 133 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	MONROE STREET # 869 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
FORT MYERS, FL 33902 P	ORT MYERS, FL 33902
12/26/2014 L	14000195382
3. Date of filing/registration in Florida 4.	Document number
5. (a) ANTON SAMOILA	_
Registered Agent and Registered Office shown on the records of the Florida Dept. of	•
3426 HAMCOCK BRIDGE PKW	14
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	— — —
UNIT# 305	
MORTH FORT MYERS, FL 3390	3 SP 3
(b) ANTON SAMOILA	23
Enter name of NEW Registered Agent and/or NEW Registered Office address:	
1350 MONROE STREET	
NEW Registered Office Address:	
<u> </u>	
FORT MYERS B 3300	02
If the limited liability company is not organized under the laws of the State of the change or changes are made, the Florida street address of the registered of agent will be identical. Or, in the case of a Florida limited liability company, was/were authorized by an affirmative vote of the members of the limited liability articles of organization on the operating agreement of the limited liability.	ifice and the business office of the registered it is hereby confirmed that the change(s) willty company or as otherwise provided in company.
Signature of a friember or authorized representative of a member	Printed or typed name of signee
I hereby accept the appointment as registered agent and agree to act in this of provisions of all statutes relative to the proper and complete performance of the obligations of my position as registered agent as provided for in Chapter to merely reflect a change to the registered office address, I hereby confirm the notified in writing of this change.	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 aat the limited liability company has been
Signature of Kegistered Agent	

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

INHS18 (2/14)