L14000/96224

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,	COVER LETTER		
TO: Registration Section Division of Corporations			
1315 GLEN EAGLES LANE	, LLC		
SUBJECT: Nam	e of Limited Liability Compa	iny	
Dear Sir or Madam:	<u>'</u>		
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are sub-	mitted for filing.	
Please return all correspondence concerning this	s matter to the following:		
Emily Smith			
Name of Person		77	~
Paracorp Incorporated	j	SEUR	
Firm/Company		SVH	
PO Box 160568		<u> </u>	
Address		SFLORIDA E.FLORIDA	2 Km
Sacramento, CA 95816		וםר א	5
City/State and Zip Code			
E-mail address: (to be used for future ann For further information concerning this matter.		2917 JU SECRE TALLAH	חד
Emily Smith	888 280.656	JL 26 HASSEI	
Name of Person		& Daytime Telephone Sumber	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADD Registration Sect Division of Corp P.O. Box 6327 Tallahassee, Flor	ion Pr. — orations	
Enclosed is a check for the following	amount:		
☑ \$25 Filing Fee	☐ \$55 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.

	1315 GLEN	EVC1 E6	LANE LIC
1. Na	me of the limited liability company:	LAGLES	LANE, ELO
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	6219 LOUISE COVE DRIVE	İ	6219 LOUISE COVE DRIVE
	WINDERMERE, FL 34786		WINDERMERE, FL 34786
	12/29/2014	ļı	L14000196224
3.	Date of filing/registration in Florida	- 4. T	Document number
5. (a)	B & C CORPORATE SERVICES OF CENT	'RAL FLϕ	PRIDA
J. (4)	Registered Agent and Registered Office shown on the records o	f the Florida D	Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET 390 NORTH ORANGE AVE STE 1400	'ADDRESS)	
	ORLANDO	32801	
(b)	Paracorp Incorporated Entername of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u> 155 Office Plaza Drive, 1st Floor	d Office addr	روی: ا ا کردن ا کردن
	NEW Registered Office Address:		JUL 26 AHASSI
	Tallahassee	L3230	n P P P P P P P P P P P P P P P P P P P
the cha agent v was/we the arti Signa I here provisi the obl to mere notified	imited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited leng authorized by an affirmative vote of the members cless of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and account of all statutes relative to the proper and completingations of my position as registered agent as providely reflect a change in the registered office address. It in writing of this change. Milton Vong, Assistant Secure of Registered Agent	of the registeriability consorting of the limited lie e limited lie e limited lie e performanted for in CI I hereby consorting of the limited lie e performanted for in CI I hereby consorting of the limited lie e limited lie e limited lie e limited lie e lie	rered office and the business office of the registered inpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in ability company. Printed or typed name of signee in this capacity. I further agree to comply with the

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