Florida Department of State Divisible of Carporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

ACIA

Email Address:

LLC REGISTERED AGENT CHANGE SWEET LARK, LLC

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K. SALY

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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.	Na	me of the limited liability company: SWEET LARK	, LLC		
2.	(a)	7901 4th St N Principal office address of limited liability company:	(b) 7901 4th St N Mailing address of fimited liability company:		
		(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BOX)	
		STE 300	STE 300	STE 300	
		St. Petersburg. FL 33702	St. Petersburg, FL 33702		
		01/02/2015	L15000000484		
3.		Date of filing/registration in Florida	4	Document number	
5.	(a)	KOONTZ, JO ANN M			
Registered Agent and Registered Office shown on the records of the Florada Dept. of State:					
1613 FRUITVILLE RD.				55 B 7	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		SARASOTA , FL_	34236	PILED PH 4: 52	
(b) Northwest Registered Agent LLC					
Enter name of NEW Registered Agent and/or NEW Registered Office address:					
7901 4th St N					
NEW Registered Office Address:					
		STE 300			
		St Dotorchura	22702		
		St. Petersburg . Ft. 3	33702		
the age was the	cha ent v s/we arti	mited liability company is not organized under the laws nge or changes are made, the Florida street address of d vill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he registered office bility company, it is the limited liability	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in	
_/	<u>Y</u>	ure of a member or authorized representative of a member		Nat Smith Printed or typed name of signee	
I h pro the to i not	erel ovisi obli nere ifice	ov accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he I in writing of this change.		acity. I further agree to comply with the duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been	
8 ig	natu:	Taylor Newman - Assistant Secretar	ry		