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

Office Use Only



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ТО:	Registration Section Division of Corporations				
CI B II	Poseidon Capital Investors. LLC				
SUBJECT: Name of Limited Liability Company					
Dear S	är or Madam:				
The en	nclosed Registered Agent/Registered Off	ice Change an	d fee(s) are submitted for filing.		
Please	return all correspondence concerning th	is matter to th	e following:		
Mark	Rosenfield				
	Name of Person		<u> </u>		
Pose	idon Capital Investors LLC				
	Firm/Company				
1340	N Great Neck Road 1272-352				
	Address				
Virgir	nia Beach, VA 23454				
	City/State and Zip Code				
mark	r@poseidoncapitalllc.com				
1	E-mail address: (to be used for future ann	ual report not	ification)		
For fu	rther information concerning this matter.	please call:			
Mark	Rosenfield	757	544-2451		
	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	Н Т Н	AAILING ADDRESS: Registration Section Division of Corporations O. Box 6327 Fallahassee, Florida 32314		
	Enclosed is a check for the following amount:				
	☑ \$25 Filing Fee	٥	\$55 Filing Fee & Certified Copy		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH LIMITED LIABILITY COMPANY

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

1. N	ame of the limited liability company: Poseidon C	Capital Inv	estors, LLC
2. (a)	Once City Plaza	(b	One City Plaza
2. (47	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)
	801 S Olive Avenue, Unit 126		801 S Olive Avenue, Unit 126
	West Palm Beach, FL 33401		West Palm Beach, FL 33401
	01/09/15		L15000005440
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Christopher Y Mills ESQ.		
	Registered Agent and Registered Office shown on the records	of the Florida	Dept, of State:
	9 '. 175 All Aller of Plabin (Crof)	T (MADECC	<u> </u>
	Registered Office Address (MUST BE FLORIDA STREE) 300 East Las Olas Blvd., Suite 1110	<u>i address</u>	
	300 East Las Olas Bivo., Suite 1110		
	Ft. Lauderdale	_{FL} 33301	
(b)	ZURAW GEIB, PLC		
, , ,	Enter name of NEW Registered Agent and/or NEW Register	red Office ad	tress:
	209 SE 5th Avenue		
	NEW Registered Office Address;		
			<u></u> ကု
	Delray Beach	_{FL} 33483	
		I I	
the ch agent was/w	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member icles of organization or the operating agreement of the	of the regi: Hiability cos s of the lim	stered office and the business office of the reg ompany, it is hereby confirmed that the change ited liability company or as otherwise provide
,	10112	Ma	rk Rosenfield
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee
I here provis	by accept the appointment as registered agent and cions of all statutes relative to the proper and comple	igree to act	in this capacity. I further agree to comply wi ance of my duties, and I am familiar with and

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply will provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and if the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has be notified in writing of this change.

Signature of Registered Agent