## L15000010424

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Nar	ne)
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> 2111 JUL 25 A II: 52 SECRETARY OF STATE

> > D PRUCE

## COVER LETTER

TO: Registration Section Division of Corporations					
505 S. PALMETTO, LLC		1			
SUBJECT: Nam	ne of Limited Li	iability Compar	ıy	_	
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Off	fice Change and	fee(s) are subn	nitted for filing.		
Please return all correspondence concerning th	is matter to the	following:			
Emily Smith		İ		<b></b> 1	•
Name of Person				SEC ALL	<u>.</u> (X)
Paracorp Incorporated				SECRETAI SECRETAI	A III O EIA
Firm/Company	~	_		SEE.	
PO Box 160568				FLORIDA	
Address					•
Sacramento, CA 95816			>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	2017 JUL	
City/State and Zip Code	<del></del>		AHAS		
			SEE	25 Far (	İΨ
E-mail address: (to be used for future and	nual report notif	ication)	· 	A III 5	Ö
For further information concerning this matter	, please call:	1	า การ เการ์	52	
Emily Smith	888 at (	280.656	3		
Name of Person		Área Code &	Daytime Telephone Numb	ber ber	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Dir P.C	AILING ADD gistration Secti vision of Corpe D. Box 6327 llahassee, Flori	on orations		
Enclosed is a check for the following	g amount:				
☑ \$25 Filing Fee	<b>□</b> \$:	 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.

rwin	и.			1				
1. Na	ame of the limited liability company:	505 S. PALME	ETTO, L	LC				
2. (a)			(b)	1				
2. (a)	Principal office address of limited li (Note: MUST BE STREET)		_ (17)	÷	Mailing address of lit (Note: MAYBE I			
	390 N ORANGE AVE SUITE	1400		390 N C	RANGE AVE	SUITE	1400	
	ORLANDO, FL 32801			ORLAN	DO, FL 32801			
	01/20/2015		L	150000	10424			
3.	Date of filing/registration i	n Florida	4.		Document numb	oer -		
	B & C CORPORATE SERVICE	ES OF CENTE	RAL FLO	RIDA				
5. (a)	Registered Agent and Registered Office sho				_ e:			
	Registered Office Address INTUST BE I		DDRESS)		_			
	ORLANDO	, FL	32801		-			
(b)	Paracorp Incorporated				_			
, ,	Enter name of NEW Registered Agent and	or NEW Registered	Office add	ress:		ALS	2017	
	155 Office Plaza Drive, 1	st Floor		ı		Fo ≯x		777
	NEW Registered Office Address:				-	EMRY	JUL 2b	
	Tailahassee	, FL	323	01	- -	GF STATE	A II: 5	D
the cha agent was/w the art Signa I here provis the ob- to mer	imited liability company is not organ ange or changes are made, the Florida will be identical. Or, in the case of a cre Authorized by an affirmative vote icles of organization or the operative ture of a member or authorized representative by accept the appointment as registered ions of all statutes relative to the profligations of my position as registered ely reflect a change in the registered of in writing of this change.	a street address of Florida limited lia of the members of agreement of the cofa member and agreement and agreement as provided	the regist ibility confithe limited li	ered offic npany, it it ited liability ability con in this cap note of my hapter 60.	e and the busines is hereby confirm by company or as a pany.  Printed or typed no cacity. I further a duties, and I am 5, F.S. Or, if this	is office of that the otherwise of signal of s	of the received the provided p	egistered ge(s) ded in with the d accepting filed

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

Milton Vong, Assistant Secretary

Signature of Registered Agent