## L1500035490

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**S Warren**JAN 31 2017

## COVER LETTER

TO:	Registration Section Division of Corporations	•					
SUBJE	Lenders Box, LLC						
	Name of Limited Liability Company						
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.				
Please	return all correspondence concerning th	is matter to the	following:				
Saina	th Sathishchandar						
	Name of Person		<del></del>				
Lende	ers Box, LLC						
	Firm/Company		_				
350 L	incoln Road						
	Address		·				
Miami	i Beach, Florida 33139						
	City/State and Zip Code		_				
sam@	endersbox.com						
E-	-mail address: (to be used for future ann	ual report notif	ication)				
For fur	ther information concerning this matter,	please call:					
Saina	th Sathishchandar	860 at (	830-0405				
	Name of Person	\ <del>\</del>	Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314				
	Enclosed is a check for the following amount:						
	□ \$25 Filing Fee	<b>2</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.

1. Na	ame of the limited liability company: Lenders Box	, LLC						
2. (a)	Lenders Box, LLC		(b)	Lenders	Box, LL	.C		
-· ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<del></del>	(0)		Mailing addr (Note: MA	ess of limite	-	
	350 Lincoln Road			812 Сур	ress Roa	ad		
	Miami Beach, Florida 33139			Newingto	on, Conr	ecticut (	06111	
	02/25/2015		L	1500003	35490			
3.	Date of filing/registration in Florida	4.			Documen	t number		
5. (a)	Vyshnavi Sathishchandar							
ν. ( <del>«</del> )	Registered Agent and Registered Office shown on the records of	the Flori	da I	ept. of State				
	350 Lincoln Road							
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRES	<u>SS)</u>					
	Miami Beach , FL	33139	9			73 23	emile emile emile (Title (Title (Title	77
(b)	Sainath Sathishchandar					375	ි. යා රා	
` '	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddr	ess:		70	บ	$\overline{\mathbf{m}}$
	350 Lincoln Road					ETASY OF STATE	12: 1.7	0
	NEW Registered Office Address:					D m	ت	•••
					17%			
	Miami Beach , FL	33139	9					
the char agent w was/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited li- tere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	f the reg ability of of the lii	iste con mit	ered office pany, it is ed liability bility com	and the behind hereby company pany.	usiness of onfirmed to or as other	ffice of t hat the d erwise p	he registered change(s) rovided in
G:				SAINA	•			DAR.
I herek provisio he obli o mere notified	ure of a member or authorized representative of a member by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change.	ree to ac perforn d for in hereby c	ct ii nar Ch con	n this capa ce of my a apter 605, firm that t	Printed or t gcity. I fur luties, and F.S. Or, he limited	ther acre	a to com	ply with the h and accept s being filed has been