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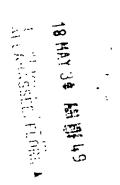
(Requestor's Name)					
(Address)					
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PICK-UP	☐ WAIT	MAIL			
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MAY 31 2018

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJ	ReSi Asset Management, Ll	_C					
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		e of Limited	Liability Company				
Dear S	Sir or Madam:						
The er	nclosed Registered Agent/Registered Offi	ce Change an	d fee(s) are submitted for filing.				
Please	return all correspondence concerning thi	s matter to th	e following:				
Denr	nis Shannon						
	Name of Person						
ReSi	Asset Management, LLC						
	Firm/Company						
120 E	East Oakland Park Blvd, Suite 105						
	Address						
Fort	Lauderdale, Florida 33334						
	City/State and Zip Code						
Denr	nisS@RealEstateSecuredInvestors	s.com					
E-mail address: (to be used for future annual report notification)							
For fu	rther information concerning this matter.	please call:					
Denn	nis Shannon	954 at (290-3212				
	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	R [] P	HAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, Florida 32314				
	Enclosed is a check for the following	losed is a check for the following amount:					
	☑ \$25 Filing Fee		\$55 Filing Fee & Certified Copy				
INHST	8 (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.

Na	me of the limited liability company: Resi Asset M	lanagr	ment, LLC		
(a)	ReSi Asset Management, LLC		(b) ReSi Asset Management, LLC		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		` ' —	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	120 East Oakland Park Blvd, Suite 105		120 Eas	st Oakland Park Blvd, Suite 105	
	Fort Lauderdale, FI 33334	_	Fort Lau	uderdale, FI 33334	
	04/02/2015		L150000	60077	
	Date of filing/registration in Florida	4.		Document number	
(a)					
	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of Stat	e:	
	Shannon, Dennis			_	
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRE.	<u>\$\$)</u>		
	1640 W Oakland Park Bivd, #303			<u>م</u>	
	Fort Lauderdale , FL	3331	1	- , 60	
	ri	· -		_	
(b)					
()	Enter name of NEW Registered Agent and/or NEW Registered	Office :	<u>iddress</u> :		
	Shannon, Dennis			AAAASSED, FLORA	
	NEW Registered Office Address:			تي :: حو	
	120 East Oakland Park Blvd, Suite 105			_	
	Fort Lauderdale	3333	4		
e cha	mited liability company is not organized under the lange or changes are made, the Florida street address of	ws of th	ne State of Flogistered office	e and the business office of the registered	
ent v is/we	will be identical. Or, in the case of a Florida limited li are authorized by an affirmative vote of the members of	ability of the li	company, it i mited liabilit	s hereby confirmed that the change(s) y company or as otherwise provided in	
	cles of organization or the operating agreement of the				
	200		106 A	UN'S OLDA A POR	
_	ure of a member or authorized representative of a member			Printed or typed name of signee	
ieret visi obli mere	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I	ree to a perfor d for in hereby	ct in this cap mance of my i Chapter 602 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5. F.S. Or, if this document is being filed the limited liability company has been	

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

Signature of Registered Agent