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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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

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## LLC REGISTERED AGENT CHANGE SETTE SETTE LLC

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C. BRUMBLEY

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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

Name of the limited liability company: So					
Principal office address of limited liability (Note: MUST BE STREET ADDR	• •	(b) Mailing address of limited liability compa (Note: MAY BE POST OFFICE BOX			
04/10/2015	·	 L1:	50000631	59	
Date of filing/registration in Flo	orida -	1.	Document	number	
(a) MIGLIETTA. ANGELA					
Registered Agent and Registered Office shown of 110 WASHINGTON AVENU	JE		nt State.	SECTO	2022 N
Registered Office Address (MUST BE FLOR APT 2510		ANGE CO	1022 DEC 20 PM 4:		
MIAMI BEACH	MIAMI BEACH . FL 33139				
(b) Northwest Registered .  Enter name of NEW Registered Agent and/or N	Agent LL	С		AHASSEE, FL	. <b>D</b>
7901 4th St N					
NEW Registered Office Address. STE 300					
St. Petersburg	, FL_33	702			
the limited liability company is not organized e change or changes are made, the Florida stream will be identical. Or, in the case of a Florias/were authorized by an affirmative vote of the articles of organization or the operating agree.	ret address of the ida limited liabili ne members of the rement of the lim	registered ity compan e limited l ited liabili	l office and the buny, it is hereby coniability company ty company.	siness office of t ofirmed that the o	he register change(s)
Signature of a member or authorized representative of a		Morgan Noble			
Signature of a member or authorized representative of a	member		Printed or ty	ped name of signee	

Tom Glover - Assistant Secretary

Signature of Registered Agent

riting of this change.