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SECRUTARY OF STATE IALLAHASSEE, FLORIDA

K.SALY EXAMINER JUN 23

COVER LETTER

TO:

INHS18 (2/14)

	Registration Section Division of Corporations		ut.			
SUBJI	Mobile Homes Holdings Suncres	t, LLC				
Name of Limited Liability Company						
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Office Ch	nange and f	See(s) are submitted for filing.			
Please	return all correspondence concerning this mat	ter to the f	ollowing:			
Barry	Gibson					
	Name of Person		_			
	Firm/Company		_			
138 S	simonton St					
	Address		_			
Key V	Vest FL 33040					
	City/State and Zip Code		_			
Barry	@smithoropeza.com					
Е	-mail address: (to be used for future annual re	port notific	eation)			
For fur	ther information concerning this matter, please	e call:				
Barry	Gibson at (,305	296-7101			
	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	Regi Divi P.O.	ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, Florida 32314			
	Enclosed is a check for the following amou	ınt:				
	■ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy			

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: Mobile Home	s Hold	ngs Suncres	t, LLC	
2. (a)	5555 College Rd	((b) 5555 College Rd		
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	Mai	ing address of limited liability company: lote: MAY BE POST OFFICE BOX)	
	Key West FL 33040		Key West F		
		_			
	5/12/2015	_	L 150000030	1500008 39 03	
3.	Date of filing/registration in Florida	4.	Do	cument number	
5. (a)	Barton W Smith				
` /	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of State:		
	138 Simonton St				
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES:	2)		
				20	
	Key West	33040			
	Pologia Dramarty Managament II C			PILED SECRETARY OF STATE TALLAHASSEE, FLORID,	
(b)	Pelagic Property Management LLC	0.00		SSE N	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	dress:	OF S	
	5555 College Rd			2: 4 ORI	
	NEW Registered Office Address:			<u> </u>	
	Key West	33040			
	, FL				
he cha igent w vas/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 lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regination the second the sec	stered office an ompany, it is he lited liability co	d the business office of the registered reby confirmed that the change(s) impany or as otherwise provided in	
	/1/Ju	Bar	ry Gibson		
_	are of a member or duthorized representative of a member			nted or typed name of signee	
rovisio he obli o mere	oy accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have in this change.	ee to act perform I for in G nereby co	in this capacit ance of my duti Chapter 605, F. onfirm that the	y. I further agree to comply with the es, and I am familiar with and accept S. Or, if this document is being filed limited liability company has been	
signatuf	e of Registered Agent				