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OIVISION OF CORPORATION

JUN 0 9 2015

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COVER LETTER

Registration Section

TO:

INHS18 (2/14)

Division of Corporations					
SUBJECT: SSBB DESIGNS, LLC Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Shann Darnen Name of Person					
Firm/Company					
3783 Biggin Church Rd W					
Jacksonville, R 32224 City/State and Zip Code					
Shannon danen o Comcast. net E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Shannon Danwer at (901) 728-8073 BRANCH Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount:					
\$25 Filing Fee \$\square\$ \$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.

Florida	2.		·
1. Na	ame of the limited liability company: SSB	516NS	,LLC.
2. (a)	3783 Biggin Church Rd V(b)	Same	,
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		imited liability company: POST OFFICE BOX)
	Jacksonville Florida	Same	<u>, </u>
	32224	Sam	<u> </u>
3.	5/27/2015 Date of filing/registration in Florida 4.	15000 Document num	093074 iber =
5. (a)	Brian DarNER		NIST 15
	Registered Agent and Registered Office shown on the records of the Florida Dept. of S	State:	NORE IZ
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	\mathcal{M}	FILE F CO F CO ASSE
	Jacksonville		OF S
	Judesonville FL 3222	4	ATATE STATE
(b)	Shannin DarNER		A T W
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	<u> </u>	,
	3783 Bissin Church R NEW Registered Office Address: Sin Church	dW	K correct
		_	
	Jacksonville, FL 3222	21	
the char	mited liability company is not organized under the laws of the State of nge or changes are made, the Florida street address of the registered of	fice and the busines	ss office of the registered
was/we	vill be identical. Or, in the case of a Florida limited liability company, are authorized by an affirmative vote of the members of the limited liability of the organization or the operating agreement of the limited liability of the	ility company or as	ned that the change(s) otherwise provided in
inc arti	Auno Suna Suna Suna Suna Suna Suna Suna Suna	hanns n	Darmon
	ure of a member or authorized representative of a member	Printed or typed na	ame of signee
provision the oblination of th	by accept the appointment as registered agent and agree to act in this come of all statutes relative to the proper and complete performance of nigations of my position as registered agent as provided for in Chapter (it) reflect a change in the registered office address, I hereby confirm the infanting of this change.	apacity. I further only duties, and I aw my duties, and I am 105, F.S. Or, if this wat the limited liabil	agree to comply with the familiar with and accept is document is being filed lity company has been
Signatur	601 Registered Agent		

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