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(F	Requestor's Name)				
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(City/State/Zip/Phone #)					
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L PICK-UP	☐ WAIT	MAIL			
1)	Business Entity Name)	_			
(Document Number)					
Certified Copies	Certificates of	Status			
Special Instructions t	o Filing Officer:				
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APR 2.7 2013 D. BRUCE

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Berger Ocean City Maryland	d, LLC			
	ne of Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Offi	ice Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this	is matter to the following:			
robert berger				
Name of Person				
Firm/Company				
123 wallace manor road		م م		
Address		TALLAH TE		
edgewater md 21037		APA 26 A		
City/State and Zip Code				
rsbcsb@aol.com		FLOS		
E-mail address: (to be used for future ann	ual report notification)	A P 5		
For further information concerning this matter,	please call:	7:-		
Robert Berger	301 518-1207			
Name of Person	Area Code & Daytime Teleph	none 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	☑ \$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. N	ame of the limited liability company: Berger Ocean	City M	aryland, L	LC
2. (a)	123 wallace manor road	_ (b)		
(,,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(-/	М	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	edgewater, MD 21037			THE SAT BE POST OFFICE BOX
		_		
	06/23/2015	l	_1500010	9106
3.	Date of filing/registration in Florida	4.	ī	Document number
5. (a)	James Strothers			
```	Registered Agent and Registered Office shown on the records of the	he Florida l	Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		
	2459 Harbour Ln			
	sanibel , FL	33957		
(b)	Sharon Michie			TALL.
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> (	Office add	ress:	音
	Cottages to Castles			PR 26
	NEW Registered Office Address:			
	2427 Periwinkle Way		·	등을 후
				# 15 H
	Sanibel	33957		<i>y</i>
signal street of the art stree	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia cre authorized by an affirmative vote of the members of iclos of organization or the operating agreement of the law ture of a member or authorized expresentative of a member by accept the appointment as registered agent and agracions of all statutes relative to the proper and complete pigations of myposition as registered agent as provided by verying of this change.	the regist bility cor f the limi limited limited limited limited ee to act appropriate	ered office npany, it is ted liability ability complete Robel in this capanice of my discountry dis	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.  The second members of signee city. I further agree to comply with the uties, and I am familiar with and accept