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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Registration Section Division of Corporations

INH\$18 (2/14)

SUBJECT:	: MANATEE INVESTMENTS FL LLC  Name of Limited Liability Company							
SOBSECT.								
Dear Sir or M	Aadam:							
The enclosed	Registered Agent/Registered Office Cl	hange and fee(s) are submitted for filing						
Please return	all correspondence concerning this ma	tter to the following:						
Main Stree	et Seo LLC							
	Name of Person							
	Firm/Company							
5139 Sout	h Rd		T. 2					
	Address	,	15 Q					
New Port I	Richey FI 34652	•	EC -					
	City/State and Zip Code		TARY OF STATE ASSEE, FLORID					
primeinves	stmentsfl@gmail.com		STATE OF THE					
E-mail	address: (to be used for future annual re	eport notification)	S 8					
For further in	nformation concerning this matter, pleas	se cali:						
-	at							
	Name of Person	Area Code & Daytime Tele	phone Number					
Regis Divis Clifto 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle thassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Encl	osed is a check for the following amo	unt:						
<b>☑</b> \$2	25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	<b>,</b>					

## 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	ime of the limited liability company: $\underline{\Lambda}$	MANATEE IN	VEST	MENTS FL	LLC			
2. (a)	5120 COUTH DD							
2. (4)	Principal office address of limited liabi (Note: MUST BE STREET AD.		(0		Mailing addre (Note: MA	ss of limited		
	NEW PORT RICHEY FL 34652	?	_	NEW PC	ORT RICH	HEY FL	3465	2
	8/25/2015		-	L150001	<del></del>			· · · · · · · · · · · · · · · · · · ·
3.	Date of filing/registration in F	lorida	4.		Document	number		<del></del>
5. (a)	PASCO FUNDING LLC							
(u)	Registered Agent and Registered Office shown	on the records of th	e Florida	Dept. of State	3 4			
	7419 US HIGHWAY 19							-
	Registered Office Address (MUST BE FLC	<u> PRIDA STREET AI</u>	DDRESS	2	·.			
						<b>#</b>	<b>~</b> 3	
	NEW PORT RICHEY	, FL	34652			SECRE	2015 DEC	TI
(b)	PASCO FUNDING LLC					TARY 1ASSE	<u>;;;</u>	
Finter mane of NEW Registered Agent and/or NEW Registered Office address:						Ti Ca	$\triangleright$	<u> </u>
				) i		STATE	H: 5	O
	NEW Registered Office Address:			<del></del>	•	<del>&gt;</del>	တ်	
	5139 SOUTH RD							
	NEW PORT RICHEY	, FL_3	34652	, ss				
signat  I herek provisio the oblito mere	mited liability company is not organize nge or changes are made, the Florida stroil be identical. Or, in the case of a Florida stroil be identical. Or, in the case of a Florida stroil be identical. Or, in the case of a Florida stroil be identical. Or, in the case of a Florida stroil by an affirmative vote of cles of organization or the operating agriculture of a member or authorized representative of a cacept the appointment as registered ons of all statutes relative to the proper gations of my position as registered agree of the reflect a change in the registered of the writing of this change.	reet address of the rida limited liab the members of reement of the limited limited liab member agent and agree and complete perit as provided in the reent as provided in	the regis pility co the limi mited li	in this capa	and the but hereby core company of pany.  Printed or type city. I furnities, and it is a city. If it is a ci	siness of infirmed the or as other of the dame of the dame of the family of this does	rwise processing the signee of the confider with the signee of the confider with the signee of the s	the registered change(s) provided in another with the th and accept is being filed.
Signatur	e of Registered Agent							