LISODC	158517
(Requestor's Name) (Address)	600278514546
(Address) (City/State/Zip/Phone #)	10/28/1501010010 **25.00
(Business Entity Name)	
(Document Number)	15
Certified Copies Certificates of Status	15 OCT 28
Special Instructions to Filing Officer:	AMIO: 48
Office Use Only	
,	OCT 29 2015 Y SULKER

eover letter

TO: Registration Section Division of Corporations

SUBJECT: 101 Canting Gainesville, LLC.

Name of Limited Liability Company

Dear Sir or Madam:

Ŀ

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alexander Thoma Name of Person

International Investment Group 101 Firm/Company

114 S.E.ISI Street, Suite's Address

Gainesville, FL 32601 City/State and Zip Code

<u>E-mail address: (to be used for future annual report notification)</u>

For further information concerning this matter, please call:

Alexander Thomas

Name of Person

at (407) 408-4644

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

□ \$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. Name of the limited liability company: 101 Canting	Grainesuille, LLC.
2. (a) <u>DAPI NE 164th Street</u> Ap+1148 Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)	(b) <u>1145E15t Street</u> <u>Suite3</u> Mailing address of limited liability company: (<u>Note: MAY BE POST OFFICE BOX</u>)
N. Miami Beach FL, 33160	Gainesville, FL 32601
<u>0911712015</u> 3. Date of filing/registration in Florida 4	L15000158517 Document number
5. (a) <u>Keith Thomas</u> MGRM Registered Agent and Registered Office shown on the records of the Fl	· ·
AZZI NE 164th Street AP- Registered Office Address (MUST BE FLORIDA STREET ADDR	
N: Miami Brach	
, FL,	3160 <u>Zan</u>
(b) <u>101 HOSPITALITY COMPANY LLC</u> Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Offic</u>	
5200 NW 43rd Street <u>NEW</u> Registered Office Address:	F STAC
#102-378	>
Gainesville FL 3	2606
If the limited liability company is not organized under the laws of the change or changes are made, the Florida street address of the agent will be identical. Or, in the case of a Florida limited liabilit was/were authorized by an affirmative vote of the members of the the articles of organization or the operating agreement of the limit	egistered office and the business office of the registered y company, it is hereby confirmed that the change(s) limited liability company or as otherwise provided in

Signature of a member or authorized representative of a member

Alexander Tham as Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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