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S MARREN

COVER LETTER

TO:

Registration Section

Divi	sion of Corporations				
SUBJECT:	ASI Partners, LLC				
	Nan	ne of Limited I	Liability Company		
Dear Sir or N	Madam:				
The enclosed	d Registered Agent/Registered Off	ice Change an	d fee(s) are submitted for filing.		
Please return	all correspondence concerning th	is matter to the	e following:		
Robert Wa	aterston				
	Name of Person				
ASI Partne	ers, LLC				
	Firm/Company				
14255 US	Highway One, Ste 296				
· · · · · · · · · · · · · · · · · · ·	Address		·········		
Juno Bead	ch, FL 33408				
	City/State and Zip Code	***	and the same of th		
robert@ad	qsinv.com				
É-mail	address: (to be used for future and	nual report not	ification)		
For further i	nformation concerning this matter	, please call:			
Robert Wa	aterston	561	325-8572		
	Name of Person		Area Code & Daytime Telephone Number		
	REET/COURIER ADDRESS:		MAILING ADDRESS:		
	istration Section ision of Corporations		Registration Section Division of Corporations		
	ton Building		P.O. Box 6327		
	1 Executive Center Circle	Tallahassee, Florida 32314			
	ahassee, Florida 32301		•		
Enclosed is a check for the following amount:					
Z 2 \$	25 Filing Fee		\$55 Filing Fee & Certified Copy		
INHS18 (2/1-	4)				

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.

l. Na	ame of the limited liability company: ASI Partner	s, LLC			
!. (a)	14255 US Highway One, Ste 296	(b) 1425	(b) 14255 US Highway One, Ste 296		
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Juno Beach, FL 33408	Juno	Beach, FL 33408		
	Sept 14 2015	L1500	0160197		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	Barner & Barner, PA				
	Registered Agent and Registered Office shown on the records of	of the Florida Dept. of	State:		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)			
	11360 Jog Road Ste 104				
	Palm Beach Gardens	_{FL} 33418			
(h)	Registered Agents, INC				
(b)	Enter name of NEW Registered Agent and/or NEW Register	red Office address:			
	3030 N Rocky Point Dr Ste 150A		AY - P		
	NEW Registered Office Address:		ים הפיי		
	Hillsborough County		STA C		
	Tampa,	_{FL} 33607	ED P 4: 2-7 COF STATE EE. FLORIDA		
the cha agent was/w	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member tieles of organization or the operating agreement of the second control of the control of t	of the registered of I liability company is of the limited lia	office and the business office of the register, it is hereby confirmed that the change(s) bility company or as otherwise provided in company. Jaterston		
_	ature of a member or authorized representative of a member		Printed or typed name of signee		
I here provis the ob to mer notifie	eby accept the appointment as registered agent and o sions of all statutes relative to the proper and comple ligations of my position as registered agent as provi rely reflect a change in the registered office address, ed in writing of this change.	agree to act in this ete performance of ided for in Chaptei , I hereby confirm	capacity. I further agree to comply with the fine duties, and I am familiar with and access to 55. Or, if this document is being file that the limited liability company has been		
Signat	ure of Registered Agent				