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## **COVER LETTER**

	gistration Section rision of Corporations						
SUBJECT:	THE IMPERIAL, LLC						
	Name of Limited Liability Company						
Dear Sir or	Madam:						
The enclose	ed Registered Agent/Registered C	Office Change and f	ee(s) are submitted for filing.				
Please retur	n all correspondence concerning	this matter to the fo	ollowing:				
OLGA I. GA	ALANTER						
	Name of Person	_	_				
SUB ROSA	LAW PLEC						
	Firm/Company		_				
1946 TYLE	R STREET, STE. 9						
	Address	-	_				
HOLLYWO	OD, FL 33020						
	City/State and Zip Code	:	_				
OIG@SUBI	ROSALAW						
E-mai	l address: (to be used for future a	nnual report notific	ration)				
For further	information concerning this matt	er, please call:					
OLGA I. GA	ALANTER	754 at (	260-5398				
	Name of Person		Area Code & Daytime Telephone Number				
Reg Div P.C	iling Address: gistration Section vision of Corporations D. Box 6327 lahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Enc	closed is a check for the following	ng amount:					
<b>d</b> √s	325 Filing Fee	□ <b>\$</b> 55	5 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. Na	ame of the limited liability company: THE IMPERIAL	L. LLC				
2. (a)		(	b)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limit (Note: MAYBE PO	ted liability	company;
	18101 COLLINS AVENUE, UNIT 4702		18101 CC	DLLINS AVENUE, U	NIT 4702	
	SUNNY ISLES, FL 33160		SUNNY	SLES, FL 33160		
	09/24/2015		L15000162	441		
3.	Date of filing/registration in Florida	— 4.		Document number		- <del></del>
5. (a)						
), (a)	Registered Agent and Registered Office shown on the records o SHAWN C. SNYDER	f the Florid	a Dept. of Sta	te:		
	Registered Office Address	ADDRES	<u> </u>	_	****	
	7931 ORANGE DRIVE	<u> </u>	_			
	DAVIE	22270		_	-	
	DAVIE , F	L_33328	<u>.</u>	_	26	
					P	
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office as	ldress:	_	7:	
		, , , , , , , , , , , , , , , , , , ,			12	
	OLGA I. GALANTER					
	NEW Registered Office Address:		<del></del> -	<del>_</del>		
	1946 TYLER STREET, STE. 9			_		
	HOLLYWOOD, F	L33020				
change agent v was/was/washe arti	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited light of the ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the ture of a member or authorized representative of a member of the accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I din kriting of this change.	e register iability ed of the lin e limited	ed office arompany, it in this can	ad the business offices hereby confirmed by company or as officed by the second of the	e of the re that the ch nerwise pr SEUSE of signee	gistered nange(s) ovided in