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Division of Corporations

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Account Number : 110432003053 : (561)694-8107 Phone Fax Number ; (561)214-8442

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LLC REGISTERED AGENT CHANGE COURT AND KANE MANAGEMENT, LLC

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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	me of the limited liability company: _	COURT AND KANE MANAGEMENT, LLC			
2. (a)	2701 CENTRAL AVE.		(b)_	2701 CENTRAL A	VENUE
<i>2.</i> . (11)	Principal office address of limited lia (Note: MUST BE STREET A		- (-/-	Mailing address of li	mited liability company: POST OFFICE BOX
	ST. PETERSBURG, FL 337	713	. -	ST. PETERSBURG,	FL 33713
		<u>.</u>	<u> </u>		
	10/26/2015			L15000181557	
3.	Date of filing/registration in	Florida	4.	Document numb	per
5. (a)	HUNTER BUSINESS LAW				
V. (4)	Registered Agent and Registered Office show	wn on the records of the	e Florida D	ept, of State:	
	119 S. DAKOTA AVENUE				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
					-· N2
	TAMPA	, FL_	33606	<u> </u>	002 HAY -2
(b)	Corporate Creations Network				¥ -2
ŕ	Enter name of NEW Registered Agent and	or NEW Registered ()ffice addr	<u>Lit</u>	
	801 US Highway 1				2 1
	NEW Registered Office Address:				
	North Palm Beach	, FL_	33408	<u> </u>	
change agent	limited liability company is not organ e or changes are made, the Florida str will be identical. Or, in the case of a ere authorized by an affirmative vote icles of organization or the operating	ized under the laws eet address of the r Florida limited liab of the members of	s of the S egistered pility com the limit imited lia	tate of Florida, it is hereby office and the business of apany, it is hereby confirmed liability company or as bility company.	ned that the change(s) otherwise provided in
	aitlin Lazarus		Cait	lin Lazarus, Attorney-	
_	ature of a member or authorized representative			Printed or typed n	
provis the ob to mei	eby accept the appointment as register tions of all statutes relative to the pro- ligations of my position as registered rely reflect a change in the registered ed in writing of this change.	red agent and agre per and complete p agent as provided office address, I h	e to act in performan for in Ch preby con	n this capacity. I further a nce of my duties, and I am napter 605, F.S. Or, if this firm that the limited liabi	agree to comply with the familiar with and accept a document is being filed lity company has been
/s/ Ca	aitlin Lazarus Cai	tlin Lazarus, Sp	ecial Se	ecretary	

Signature of Registered Agent