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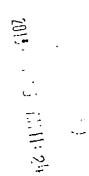
(Requestor's Name)				
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PICK-UP	☐ WAIT	MAIL.		
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Arthur anthony.arthur@cscqlobal.com

Date: October 14, 2019

Order#: 939652/021

Re: PREMIER ESTATES 509, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

<u>XX</u> Return Regular Mail in the enclosed envelope.

Attn:Anthony Arthur c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.

I. N	ame of the limited liability company: PREMIER EST	TATES 509	LLC
2. (a)	5115 EAST STATE ROAD 64	(b)	5115 EAST STATE ROAD 64
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company; (Note: MAY BE POST OFFICE BOX)
	BRADENTON, FL 34208-5509	<u> </u>	BRADENTON, FL 34208-5509
	12/02/2015		L15000201128
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	ROTELLA LEGAL GROUP P.A.		
V V	Registered Agent and Registered Office shown on the records of	t'the Florida	Dept, of State:
	100 SOUTH ASHLEY DRIVE, SUITE 375		2015
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	TAMPA	L_33602	
			<u> </u>
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	d Office add	——————————————————————————————————————
	Table hame of Japan Registered Agent and the Mark Registered	u viinee auu	
	1201 Hays Street		
	NEW Registered Office Address:		
	Tallahassee Fi	L_32301	
the cha agent was/w	timited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited l ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the regist iability con of the limi e limited li	ered office and the business office of the registered npany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in ability company.
Signa	iture of a njember or authorized representative of a member	JIII C	Ilmi, Authorized Person Printed or typed name of signee
I here provis, the obj to mer notifie	by accept the appointment as registered agent and agions 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. It is writing of this change.	e performa ed for in C hereby co	In this capacity. I further agree to comply with the nee of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed after that the limited liability company has been