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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Floresta, LLC	nited Liability Company
Name of Em	inted Diability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chan	ige and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
JULIE SCHULZ Name of Person	
SUMMIT GROUP MANAGEMENT, LLC Firm/Company	
3427 BANNERMAN ROAD, SUITE D	208
Address	
TALLAHASSEE FL 32312	
City/State and Zip Code	
julie.schulz@summitgroup.biz E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please of	call:
JULIE SCHULZ at (_	950) 219-8207
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amoun	t:
S25 Filing Fee	☐ \$55 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.

I. Nai	me of the limited liability company:OY	resta, LLC
2. (a)	3427 BANNERMAN ROAD Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) 3425 BANNERMAN ROAD Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	_SUITE_D208	SUITE_105-428
	TALLAHASSEE FL 32312	TALLAHASSEE FL 32312
3.	12 04 2015	L15000202819
5. (a) (b)	Date of filing/registration in Florida SUMMIT GROUP INTERNATIONAL MAN Registered Agent and Registered Office shown on the records o 20.73 SUMMIT LAKE DRIVE Registered Office Address (MUST BE FLORIDA STREET SUITE 15.5 TALLAHASSEE	the Florida Dept. of State: ADDRESS) L_32317
	TALLAHASSEE	ı. 32312
I hereb provision the oblit to mere notified	mited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited the authorized by an affirmative vote of the members cles of organization or the operating agreement of the under of a member or authorized representative of a member or accept the appointment as registered agent and as	aws of the State of Florida, it is hereby confirmed that after of the registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in