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TO:	Registration Section Division of Corporations						
SUBJI	Panama City Real Estate, Ll	Panama City Real Estate, LLC					
	· · · · · · · · · · · · · · · · · · ·	e of Limited Liability Company					
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for filing.					
Please	return all correspondence concerning this	s matter to the following:					
Marg	aret L. Patterson						
•	Name of Person						
Brook	kins Elderserve, Inc.						
	Firm/Company						
3375	Capital Circle NE, Suite 1A						
	Address						
Tallal	hassee, FL 32308						
	City/State and Zip Code						
office	@brookinselderserve.com						
Е	E-mail address: (to be used for future annu	ual report notification)					
For fur	rther information concerning this matter,	please call:					
Marga	aret L. Patterson	850 297-1107					
	Name of Person	Area Code & Daytime Telephone Number					
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
	Enclosed is a check for the following	amount:					
	\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy					
INHS18	8 (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: Panama City	Real E	Est	ate, LLC	;	
2.	(a)	3375 Capital Circle NE, Suite 1A	(ъ)	PO Box	13085	
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	.0)	N	_	of limited liability company: BE POST OFFICE BOX)
		Tallahassee, FL 32308	_	_	Tallahas	see, FL 323	317
			_	_			
		12/17/2015		L	1500020)8341	
3.		Date of filing/registration in Florida	4.	_		Document nu	mber
5.	(a)	Emily S. Waugh					
٦.	(a)	Registered Agent and Registered Office shown on the records of	the Florid	Ja D	Pept. of State	!:	
		123 S. Calhoun St.					
		Registered Office Address [MUST BE FLORIDA STREET]	ADDRES	S)		•	
							28
		Tallahassee , FL	32301	1			2017 MAR 24 SILURILIAR TALLAHASS
	<i>(</i> 1.)					•	R 24
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office ac	ddr	ess:		
					 -		AK 9: 25
		Margaret L. Patterson					ORIE 72
		NEW Registered Office Address:				•	Ç, √
		3375 Capital Circle NE, Suite 1A					
		Tallahassee, FL	32308	3			
the age wa the	cha ent v s/we arti	imited liability company is not organized under the law inge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the reginability confirmation of the limited	iste on nit lia	ered office pany, it is ed liability	e and the busing the hereby confinence or a company or a spany. Tookins	ness office of the registered rmed that the change(s) as otherwise provided in
		ure of a member of authorized representative of a member				• •	I name of signee
I h pro the to i not	erel ovisi obli nere ified	by accept the appointment as registered agent and agrons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have a change.	ee to ac perforn d for in hereby c	et in nar Ch con	n this capa ace of my a apter 605, firm that t	icity. I furthe, luties, and I a , F.S. Or, if th the limited liad	r agree to comply with the m familiar with and accept his document is being filed bility company has been
Sig	naju	re offegistered Agent					