L1600000 2843

(Requestor's Name) (Address)	
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(City/State/Zip/Phone #)	
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(Business Entity Name)	
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J. HARRIS

COVER LETTER -

TO:	Registration Section Division of Corporations			
SHRI	WENDY HUGHES TEAM LLC			
COLA	Name of Limited Liability Company			
Dear S	Sir or Madam:			
The er	nclosed Registered Agent/Registered Offi	ce Change and	I fee(s) are submitted for filing.	
Please	return all correspondence concerning thi	s matter to the	following:	
JB R	ОТН			
	Name of Person			
ROT	H LAW FIRM PL			
	Firm/Company	-		
6100	GREENLAND RD., SUITE 604			
	Address			
JACI	KSONVILLE, FL 32258			
_	City/State and Zip Code			
JB@	ROTHLAWFIRM.NET			
<u> </u>	E-mail address: (to be used for future ann	ual report noti	fication)	
For fu	rther information concerning this matter,	please call:		
JB R	отн	904	595-7900	
	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	Re D P.	AILING ADDRESS: egistration Section vision of Corporations O. Box 6327 illahassee. Florida 32314	
	Enclosed is a check for the following	amount:		
	☑ \$25 Filing Fee	□ \$	55 Filing Fee & Certified Copy	
INHSI	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

2950 HALCYON LANE	(b) 2950 HALCYON LANE
Principal office address of limited liability (Note: MUST BE STREET ADDR	ompany: Mailing address of limited liability compan
NO. 102	NO. 102
JACKSONVILLE, FL 32223	JACKSONVILLE, FL 32223
01/05/2016	L160000028 4 3
Date of filing/registration in Flor	da 4. Document number
a) _ ROTH LAW FIRM PL	
Registered Agent and Registered Office shown on	ne records of the Florida Dept. of State:
234 CANAL BLVD	
	A STREET ADDRESS)
SUITE 2	281 AUG 1
PONTE VEDRA BEACH	
, ROTH LAW FIRM PL	3555 - 1
Enter name of NEW Registered Agent and/or NE	Registered Office address:
6100 GREENLAND ROAD	V Registered Office address:
NEW Registered Office Address:	
SUITE 604	
JACKSONVILLE	, FL_32258
e limited liability company is not organized u	ader the laws of the State of Florida, it is hereby confirmed that af address of the registered office and the business office of the regi

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Printed or typed name of signee

Signature of Registered Agent

Signature of almember or authorized representative of a member