**Division of Corporations** 

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name: REGISTERED AGENTS INC.

Account Number: I20090000081 : (307)200-2803 Phone Fax Number : (855)330-1010

> \*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_\_

## LLC REGISTERED AGENT CHANGE 3H INVESTMENTS 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.

ı Nie	ime of the limited liability company: 3H INVE	STM	MENTS	LLC		
1. Na 2. (a)	1560 Matthew Drive			Matthew Drive		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	·	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	Ste I		Ste I			
	FORT MYERS, FL 33907		FORT N	YERS, FL 33907		
	01/19/2016		L16000	009789		
3.	Date of filing/registration in Florida	4.		Document number		
• ( )	LEE CEV MALI					
5. (a)	Registered Agent and Registered Office shown on the records o	f the Flor	ida Dept-of Sta	— Ie		
	1560 Matthew Drive Ste I					
	Registered Office Address (MUST BE FLORIDA STREET	`ADDRE	<u>SS)</u>	_	79	
	FORT MYERS	<sub>.</sub> 7 3390	07	-	שלין ול 1 חחר ו	77
(b)	Northwest Registered Agent	LLC			- ح	i i
	Enter name of NEW Registered Agent and/or NEW Registere		address:	_	PH I	
	7901 4th St N			_	- G	-54
	NEW Registered Office Address.					
	STE 300			_		
	St. Petersburg	<sub>L</sub> 337	02			
the chagent	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	aws of t of the re liability s of the	he State of F gistered office company, it limited liabil	is hereby confirmed ity company or as oth	that the change	(s)
$\sim$	) O.u.		1organ Not	ole		
Sign	ature of a member or authorized representative of a member	_		Printed or typed name	of signee	

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 the change.

Signature of Registered Agent