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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

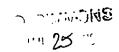
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Climate Carl Car *Com

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COVER LETTER

TO: Registration Section Division of Corporations						
Change of the REGISTERED SUBJECT:	CT: Change of the REGISTERED OFFICE address					
· · · · · · · · · · · · · · · · · · ·	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this	s matter to the following:					
Anna Golik						
Name of Person						
ALG Mortgage LLC						
Firm/Company						
3200 N Federal Hwy, suit 106						
Address						
Boca Raton, FL, 33431						
City/State and Zip Code						
info@r1coffee.com						
E-mail address: (to be used for future annu	ral report notification)					
For further information concerning this matter, p	please call:					
Anna Golik	5617746674					
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 a	amount:					
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy					

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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

1. Na	ime of the limited liability company: ALG Mortgage	LLC		
2. (a)	3200 North Federal HWY, SUIT 106		(b) 3200 No	rth Federal HWY, SUIT 106
_, (,,,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	-	,	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	BOCA RATON, FLORIDA, 33431	_	BOCA R	ATON, FLORIDA, 33431
		_		
	02/03/2016		L1600002	4087
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	ANNA GOLIK			; '
,	Registered Agent and Registered Office shown on the records of th	ie Flori	da Dept. of State	:
	17529 MIDDLEBROOK WAY, BOCA RATON	1		
	Registered Office Address (MUST BE FLORIDA STREET AL	DDRE.	55)	•
				27.
	, FL_3	33496	5 ——————	• ;
/ l = \	ANNA GOLIK			
(h)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office a	ddress:	
	3200 North Federal HWY, SUIT 106			
	NEW Registered Office Address:	<u> </u>		
	BOCA RATON			
	3	343°		
the cha agent v was/we the arti	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liability and aftermative vote of the members of cles of organization or the operating agreement of the liability of a member or authorized type of a member of a member of authorized type of a member o	he reg pility of the li imited	istered office company, it is nited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to merc	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address. I he is writing of this change.	erfori för in	nance of my a Chaptèr 605	uties, and I am familiar with and accept FS Or if this document is being filed

Signature of Registered Agent