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## **COVER LETTER**

Division of Corporations	
Subject: Southern L	of Limited Liability Company
Name	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offic	ee Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Bub Bratler Name of Person	
Southern Living L	<u>LC</u>
710 Via Esplanac	33950
_	33950 SEE
Purita Gorda, FL 3 City/State and Zip Code	
E-mail address: (to be used for future annu	al report notification)
For further information concerning this matter, p	please call:
Bob Bratler	at ( 239 ) 339 - 7642
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	nmount;
☑ \$25 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.

1. Na	ime of the limited liability company:	nthern	Living	HC	
	710 Via Esplanade  Principal office address of limited liability comp  (Note: MUST BE STREET ADDRESS)  Physical Conda, FL 339	(b)	710 Mailing ( <u>Not</u>	Via ESING address of limited liabilities: MAY BE POST OFFI	ty company: (CE BOX)
3.	Date of filing/registration in Florida  PETER MHZZEI		L/600	00 41 502 ument number	
5. (a)	Registered Agent and Registered Office shown on the re  3 40 THM/HULL TRL  Registered Office Address (MUST BE FLORIDAS:  168	N TREET ADDRESS)		TALLAHASS	18 DEC 21
(b)	MAPLET BOB DRATLER Enter name of NEW Registered Agent and/or NEW Re	. FL 34,		EL PLUMDA	18 DEC 21 M 8: 02
	710 VIIA ESPLANAT	DE	<del></del>		
	Funta Gorda	_, <sub>FL</sub> _33	150		
the cha agent v was/we the arti	imited liability company is not organized underinge or changes are made, the Florida street additional to the identical. Or, in the case of a Florida line authorized by an affirmative vote of the mercles of organization or the operating agreement	dress of the regist mited liability cor mbers of the limit t of the limited lia	ered office and npany, it is here led liability com ability company	the business office of by confirmed that the pany or as otherwise	the registered change(s)
I herel provisi the obl. to mere notified	ture of a member or authorized representative of a member by accept the appointment as registered agent a cons of all statutes relative to the proper and congustions of my position as registered agent as purely reflect a change in the registered office add it in friting of this change.		Print	ed or typed name of signe	