## L16000046787

(Requestor's Name)				
(Address)				
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<u></u> ` '	COVER	LETTER		
TO: Registration Section Division of Corporations				
617 CHARING CROS	S COURT, LLC	1		
OUNTELL	Name of Limited	Liability Company		
Dear Sir or Madam:		i		
The enclosed Registered Agent/Register	red Office Change a	nd fee(s) are submitted for filing.		
Please return all correspondence concer	ning this matter to th	he following:		
Emily Smith			_	~)
Name of Persor	1	· · · · · · · · · · · · · · · · · · ·	SECI ALL!	7. LIG
Paracorp Incorporated		1	AHASI	BECEIV
Firm/Company	1 24 2 2 1 1 1 2		SEE.	
PO Box 160568			FLOR	<b>三</b> [17]
Address			ORIDA	<b>2</b>
Sacramento, CA 95816		!		
City/State and Zip (	Code		2011 SEC TALL	
E-mail address: (to be used for fut	ure annual report no	otification)	2011 JUL 2 SECRETVE ALLAHASS	F
For further information concerning this	matter, please call:	1	b A SEE.F	
Emily Smith	888 at (	280.6563	Logal Logal	
Name of Person	··· (	Area Code & Daytime Telepl		
STREET/COURIER ADDRE 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 fol	lowing amount:			
☑ \$25 Filling Fee		\$55 Filing Hee & 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. Nai	me of the limited liability company: 617 CHAF	RING CROS	S COURT, LLC
2. (a)		(b)	
2. (u) _	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	189 S ORANGE AVE STYE 970		189 S ORANGE AVE STYE 970
	ORLANDO, FL 32801		ORLANDO, FL 32801
	03/08/2016	L	16000046787
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	B & C CORPORATE SERVICES OF CEI	NTRAL FLC	RIDA
	Registered Agent and Registered Office shown on the record	is of the Florida I	Dept. of State:
	Registered Office Address (MUST BE FLORIDA STRE	(ET <u>ADDRESS)</u>	
	390 NORTH ORANGE AVE STE 1400		
	ORLANDO	, FL_32801	
		,	
(b) .	Paracorp Incorporated	<u> </u>	<u> </u>
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regist</u>	ered Office addi	<u>'ès:</u> ¹
	155 Office Dlags Drive law Place		TALLAHA
	155 Office Plaza Drive, 1st Floor NEW Registered Office Address:	<del></del>	Hin Si
			TIL 26 CRETARY O
	Tallahassee	, FL3230	A II: 5
			5 5
agent w was/we the artic	mited liability company is not organized under the rige or changes are made, the Florida street addres fill be identical. Or, in the case of a Florida limite reduthorized by an affirmative vote of the membereds of organization or the operating agreement of the operating agreement of the operating agreement of the operation of the operation of the operation agreement of the operation of the operation agreement of the operation o	ed liability con ers of the limit the limited lig	npany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
provision the oblicition to mere	ly accept the appointment as registered agent and ons of all statutes relative to the proper and comp gations of my position as registered agent as provive reflect a change in the registered office address in writing of this change.	l agree to act i lete performa vided for in Cl s, I hereby cor	n this capacity. I further agree to comply with the note of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed after that the limited liability company has been
Claration	Milton Vong, Assistant S	ecretary	•
Signatur	of Registred Agent		1

FILING FEE: \$25.00