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## **COVER LETTER**

TO: · Registration Section

INHS18 (2/14)

**Division of Corporations** Parks Advocacy Group, LLC Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: **Greg Parks** Name of Person Parks Advocacy Group, LLC Firm/Company 3400 SW 27th Ave, #203 Address Miami, FL 33133 City/State and Zip Code greg.parks@theparksgroup.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Greg Parks Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount: ☐ \$55 Filing Fee & Certified Copy **■** \$25 Filing Fee

## 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. N	ame of the limited liability company: Parks Advoca	acy Group, LLC			
2. (a	)	(b)			
` ,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	M	ailing address o	f limited	l liability company: FOFFICE BOX)
	3400 SW 27th Ave, #203	3400 SW 27th Ave, #203			
	Miami, FL 33133	Miami, FL	_ 33133		
	03/15/16	L,1600005	50931		
3.	Date of filing/registration in Florida	4. Document num	nber	· <del>-</del>	
5. (	2)				
<i>J</i> . (	Registered Agent and Registered Office shown on the records of	the Florida Dept. of State:			
	Greg Parks				
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRESS)			
	171 Atlantic Ave, #26				
	Cocoa Beach , FL	32931	ingere Transport	100 100 100	i
(1	Greg Parks		RETARY OF STATE AHASSEF, FLORID	للشين المعادد	etzasumikan genemikan
`	Enter name of NEW Registered Agent and/or NEW Registered	Office address:		ď V	m
			STA ATS	A II: 05	D
	NEW Registered Office Address:		DA NA	05	
	3400 SW 27th Ave, #203			•	
	Miami	33133			
the cagen was/	e limited liability company is not organized under the law hange or changes are made, the Florida street address of t will be identical. On in the case of a Florida limited li- were authorized by an affirmative vote of the members of rticles of organization or the operating agreement of the	ws of the State of Flor the registered office a ability company, it is of the limited liability limited liability comp	and the busir hereby confi company or	ness of rmed t	fice of the registered hat the change(s)
Sis	Signature of a member or authorized representative of a member		Printed or typed name of signee		
I he prov the c to m notij	reby accept the appointment as registered agent and agrisions of all statutes relative to the proper and complete biligations of my position as registered agent as provide erely reflect a change in the registered office address, I lied in writing of this change.	ree to act in this canad	city. I furthe	r agre	e to comply with the
Sign	ature of Registered Agent				