L16 0000 52665

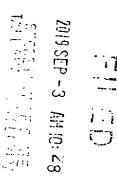
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COVER LETTER

10:	Division of Corporations					
SUBJI	ECT: MARSH VENTURES Name of Lin	LLC (DIB/A	G.MARSH VE			
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Office Char	ge and fec(s) are submitted for	r filing.			
Please	return all correspondence concerning this matter	to the following:				
	CARRY MARSH Name of Person					
	G MARSH VENTURES Firm/Company					
_2	75 SW 3RD ST Address					
B	OCA RATON City/State and Zip Code					
	ARRY J MARSH @ GMAILmail address: (to be used for future annual repo	rt notification)				
For fur	ther information concerning this matter, please of	eall:				
	CARRY MARSH at (561) 886 Area Code & Daytim	8 19 2 ne 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 3231	4			
	Enclosed is a check for the following amount:					
	□ \$25 Filing Fee	\$55 Filing Fee & Certific	d 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. Name of the limited liab	ility company:	ARSH VE	VIVRES LLC	<u> </u>
2. (a) 275 SW	3RD ST	(b)	275 \$	W 3RD ST
Principal office ad	dress of limited liability company			nited liability company:
 -	ST BE STREET ADDRESS)	•	. 0.	OST OFFICE BOX)
<u>BOCA</u>	RATON		*	470N
FL 3343	[<u>2</u>		FL 3343:	<u> </u>
3/15/5			L16 0000	526 65
3. Date of filing	g/registration in Florida	4.	Document number	ЭГ
5. (a) IN CORP	SERVICES,INC			
	istered Office shown on the recor	rds of the Florida Dept	of State:	
Registered Office Address	s <u>(MUST BE FLORIDA STR</u>	EET ADDRESS)		
17888 6	7TH COVET	NORTH		
LOXAHAT	c HEE	.FL 3347	2	
(b) GARRYT	MARSH			7 25
(0)	stered Agent and/or NEW Regis	stered Office address:		7019 SEP
Times mante or <u>regree recep</u>	Microsoft and or interest	ACTUAL VIII CONTRACTOR OF THE		节
275 5	W 3RD 5	T		· L
NEW Registered Office A	Address:			霊ーコ
B006	+ RATON			王 三
				2
		, FL <u>334</u>	<u>32</u>	, , , , , , , , , , , , , , , , , , , ,
If the limited liability compar	ny is not organized under th	he laws of the State	e of Florida, it is hereby	confirmed that after
the change or changes are ma	ide, the Florida street addre	ess of the registered	d office and the business	office of the registered
agent will be identical. Of, it was/were authorized by an al	firmative vote of the memb	oers of the limited	liability company or as o	therwise provided in
the articles of organization or	the operating agreement of	of the limited liabil		
			GARRY 1	
Signature of a member or authori	•		Printed or typed nar	2
I hereby accept the appoints provisions of all flatutes relative obligations of the position to merely reflect dechange in notified in writing of this characteristics.	nent as registered agent an tive to the proper and com a as registered agent as pro the registered office addre inge.	d agree to act in the plete performance ovided for in Chapess, I hereby confir	ns capacity. I further as of my duties, and I am J ter 605, F.S. Or, if this i m that the limited liabili	ree to comply with the amiliar with and accept document is being filed ty company has been
Signature of Registered Agent		_		