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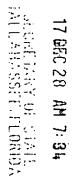
(Re	questor's Name)			
(Address)				
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PICK-UP	☐ WAIT	MAIL		
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COVER LETTER

то:	Registration Section Division of Corporations					
SUBJI	Serenity Crossing LLC					
	Nar	ne of Limited Liab	ility Company			
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Of	fice Change and fe	e(s) are submitted for filing.			
Please	return all correspondence concerning th	nis matter to the fol	lowing:			
Mark	Gaffney					
	Name of Person					
Serer	nity Crossing LLC					
	Firm/Company					
1300	Melshire Avenue					
	Address					
Delto	na, FL 32738					
	City/State and Zip Code					
serer	itycrossingflorida@gmail.com					
Ŧ	-mail address: (to be used for future an	nual report notifica	ition)			
For fu	For further information concerning this matter, please call:					
Mark	Gaffney	386	753-8961			
	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	Regis Divis P.O.	MAHLING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:						
	■ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy			

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	nme of the limited liability company: Serenity Cros	ssing LLC			
2. (a)	Serenity Crossing LLC	_ (b) Sere	Serenity Crossing LLC		
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	1300 Melshire Avenue	1300	0 Melshire Avenue		
	Deltona, FL 32738	Delt	ona, FL 32738		
	06/15/2016	L160	00115844		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	Legalinc Corporate Services Inc.				
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept. c	of State;		
	5237 Summerlin Commons				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	<u></u>		
	Suite 400				
	Fort Myers	33907	<u>——</u>		
(b)	Mark Gaffney Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office address:	AM 7: 34 FOR STATE		
	NEW Registered Office Address:				
	1300 Melshire Avenue				
	Deltona . Fi	_32738			
the chagent was/w the art Signal I here provis the obto mer	limited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited I are authorized by an affirmative vote of the members jeles of organization or the operating agreement of the flow accept the appointment as registered organization and agains of all statutes relative to the proper and complete figations of my position as registered agent as provided in writing of this change.	f the registered iability company of the limited lie limited liability Lorraine Lorraine tree to act in this performance of the limited liability li	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company. Gaffney Printed or typed name of signee s capacity. I further agree to comply with the of my duties, and I am familiar with and accept or 605, F.S. Or, if this document is being filed		