<u>L16000/45461</u>

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(Business Entity Name)				
(Document Number)				
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K. SALY

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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ACCOUNT NO. : I2000000195 REFERENCE : 74-8894, 7805227 AUTHORIZATION : Marine Marine COST LIMIT : \$ 25.00 ORDER DATE : July 11, 2017 ORDER TIME : 9:51 AM ORDER NO. : 718894-005 CUSTOMER NO: 7805227			
AUTHORIZATION : Mana COST LIMIT : \$ 25.00 ORDER DATE : July 11, 2017 ORDER TIME : 9:51 AM ORDER NO. : 718894-005		ACCOUNT NO.	: I2000000195
COST LIMIT : \$ 25.00 ORDER DATE : July 11, 2017 ORDER TIME : 9:51 AM ORDER NO. : 718894-005		REFERENCE	
COST LIMIT : \$ 25.00 ORDER DATE : July 11, 2017 ORDER TIME : 9:51 AM ORDER NO. : 718894-005		AUTHORIZATION	Typuella Homan
ORDER TIME : 9:51 AM ORDER NO. : 718894-005		COST LIMIT	: \$ 25.00
ORDER TIME : 9:51 AM ORDER NO. : 718894-005			
ORDER NO. : 718894-005	ORDER DATE :	July 11, 2017	
	ORDER TIME :	9:51 AM	
CUSTOMER NO: 7805227	ORDER NO. :	718894-005	
	CUSTOMER NO:	7805227	
		~	

CHANGE OF AGENT

NAME: SATURN LAND GROUP, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

CONTACT PERSON: Melissa Zender -- EXT#

EXAMINER:

7/11/11/

COVER LETTER

TO: **Registration Section** Division of Corporations

SUBJECT: <u>SATURN LAND GROUP, LLC</u> 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:

JEANNE CODY Name of Person

DYNAMIC DEFENSE MATERIALS LLC Firm/Company

10 BOK 1339 Address

MARLTON NJ 0805.3 City/State and Zip Code

<u>i. cody C. ddmat. Cont</u> E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEANNE CODY at (8.56) 552-4484 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 amount:

□ \$25 Filing Fee

S55 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.

I. Na	me of the limited liability company: <u>Saturn Land Gro</u>	up. LLC	
2. (a)	1000 Fifth Street	(b)	1000 Fifth Street
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (<u>Note: MAY BE POST OFFICE BON</u>)
	Suite 200		Suite 200
	Miami, FL 33139	·	Miami, FL 33139
	08/05/2016		L16000145461
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Robert Lipinski	_	
•• (,	Registered Agent and Registered Office shown on the records of t	he Florida I	Dept. of State:
	1000 Fifth Street		
	Registered Office Address (MUST BE FLORIDA STREET A	<u>(DDRESS)</u>	
	Suite 200		
	Miami, FL	33139	مسجد 1 الملح
(b)	Corporation Service Company		
(0)	Later name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	
			101 8
	1201 Hays Street		22
	<u>NEW</u> Registered Office Address.		
	Tailahassee, FL	32301	
the chi agen f	limited liability company is not organized under the lay ange or changes are made, the Florida street address of will be denucal. Or, in the case of a Florida limited lia ere adihorized by an affirmative vote of the members of icles of organization or the operatifig agreement of the	vs of the the regis ability co of the lim	State of Florida, it is hereby confirmed that after stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in iability company.
	the company of the		Printed or typed name of signee
I hert provis the ob	nure of a member or authorized representative of a member why accept the appointment as registered agent and age icons of all statutes relative to the proper and complete digations of my position as registered agent as provide why reflect a change in the registered office address. I d in writing of this change.	ree to act performa d for in C hereby ci	t in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accep Thapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been
Signat	ure of Registered Year Corporation Service Company	BY:	Melissa Zender Asst. Vice President
	Division of Corporations• P.O.		
		CC. 635	00

FILING FEE: \$25.00

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