116000149212

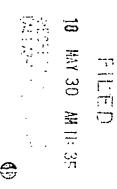
(Requestor's Name)				
(Address)				
(Address)				
	City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



700313787907

05/39/48--01010--004 **100.00



O SIMMONS JIIN 0 1 2018

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	ime of the limited liability company: LEABRIDGE	INVESTMEN	ITS 3, LLC	
2. (a)		(b)	<u> </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)	
3.	08/09/2016 Date of filing/registration in Florida	L1600	Document number	
5. (a)				
Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 618 E. SOUTH ST., STE. 500				
		_32801	WASO W	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Kovar Law Group	d Office address:	<u> </u>	
	NEW Registered Office Address: 618 E. South St., Ste. 500			
	Orlando, FI	32801		
signa I here provis. the obt to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I	f the registered of the limited liability company of the limited liability IEROME Tree to act in this performance of the performance of the limited liability in the liability	office and the business office of the registered v, it is hereby confirmed that the change(s) ability company or as otherwise provided in v company. EROWE, Manager Printed or typed name of signee st capacity. I further agree to comply with the first duties, and I am familiar with and accept to 605, F.S. Or, if this document is being filed that the limited liability company has been	
· //	ovar Law Group & Wesley T.	. Unna-	ay, Esq.	

Division of Corporations ● P.O. Box 6327 ● Tallahassee, FL 32314 FILING FEE: \$25.00