## 116000/65117

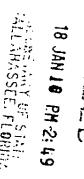
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	<del></del>

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		COVER LET	ΓER	
TO: Registration Section Division of Corporations		ts.	•	
SUBJECT: South	Beach	Cycle C of Limited Liabil	ity Company	
Dear Sir or Madam:				
The enclosed Registered Agent/Re	egistered Offic	ce Change and fee	(s) are submitted t	for filing.
Please return all correspondence c	oncerning this	s matter to the foll-	owing:	
Ronald De				
Name of I Soleth Bea	ich Cy	icle LLC	2	
Firm/Con	•	Blvd.		;
Address  Lauderdole	;		7 3330	S
City/State and				
Southbearing of E-inail address: (to be used f	rOZmic or future anni	l Com al report notificat	ion)	
For further information concerning	g this matter, p	please call:		
Debarah De Classis Name of Person		_ at (	701 - \$1.	ime Telephone Numbe
STREET/COURIER AD Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahasser, Florida 3230 Enclosed is a check for t	rcle I	Regist Divisio P.O. B Tallah	ING ADDRESS: ration Section on of Corporation ox 6327 assec, Florida 323	S

□ \$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. Na	me of the limited liability company:South_	Beach C.	yok LLC
2. (a)		(b)	·
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	250 Commoveid Blvd.		Same as'
	Lauderdale By The Sea FT	33348	plyincipal off address
	10/11/16	16	-8017096762-3
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Legal Zoom  Registered Agent and Registered Office shown on the records of the	e Florida Dept. of Sta	tate:
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	
	_250 Commercial Blvd		_
	Lauderdale By The Sea. FL	33308	HA JAN
(b)	Enter name of NEW Registered Agent and/or NEW Registered C	Manual Co	SEE
	Deborah De Classis	Mice adoress: >c	The R. T.
	NEW Registered Office Address:  250 Commercial Blud		
	Landerday By The Sea FL	33305	8
the cha	imited liability company is not organized under the law- inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	he registered offi- bility company, it the limited liabil imited liability co	fice and the business office of the registere it is hereby confirmed that the change(s) litty company or as otherwise provided in company.
Sime	ture of a member or authorized representative of a member	Mona	Printed or typed name of signee
I herei provisi the obl to mere notified	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	e to act in this ca	anacity. I further agree to comply with the

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