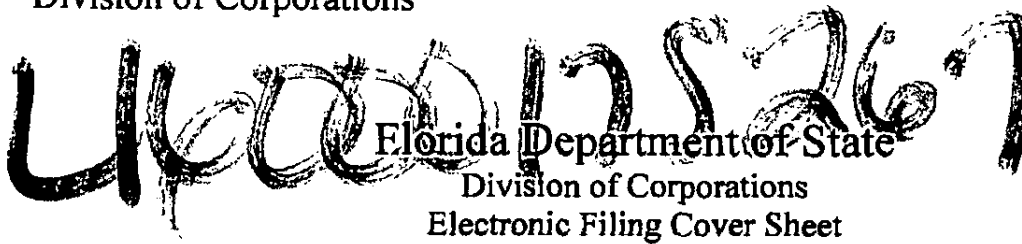


## Division of Corporations

Page 1 of 2



**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H16000263130 3)))



H160002631303ABCVW

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : ROBERT D. ROYSTON, JR., P.A.  
Account Number : I20150000047  
Phone : (239) 205-2225  
Fax Number : (239) 205-2016

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**LLC REGISTERED AGENT CHANGE  
JAMES M. THOMPSON TWO, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

OCT 28 2016

S. YOUNG

(((H16000263130 3)))

# 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 liability company: James M. Thompson Two, LLC

2. (a) Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
20041 S. Tamiami Trail, Suite 9  
Fort Myers, FL 33928

(b) Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
11328 Paseo Dr.  
Fort Myers, FL 33912

3. 09/23/2016 Date of filing/registration in Florida

4. L16000178267 Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
Thompson, James M, Jr.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

57 Macuro Court

Fort Myers, FL 33912

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Thompson, James M., Jr.

NEW Registered Office Address:

11328 Paseo Dr.

Fort Myers, FL 33912

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

James M. Thompson Jr.  
 Signature of a member or authorized representative of a member

James M. Thompson, Jr.

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

James M. Thompson Jr.  
 Signature of Registered Agent

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

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