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(Re	equestor's Name)	
(Ac	dress)	
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COVER LETTER

	Registration Section Division of Corporations	٠.	,
SUBJE			<u> </u>
	Name	of Limited	Liability Company
Dear Si	or Madam:		
The enc	losed Registered Agent/Registered Offic	e Change an	d fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this	matter to the	e following:
Mark F	Ruddy		
	Name of Person		············
Ruddy	Gregory PLLC		
	Firm/Company		
1225 1	5th ST NW		
	Address		
Washi	ngton, D.C. 20005		
	City/State and Zip Code		一篇五十
mrudd	y@ruddylaw.com		fication)
E-	mail address: (to be used for future annu	al report not	fication)
For furtl	ner information concerning this matter, p	olease call:	2 29
Laura	Ospina	202 at (797-0762
	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	R D P	egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314
	Enclosed is a check for the following a	mount:	
	☑ \$25 Filing Fee		355 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.

(a)		((b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	· ·	(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	:
	360 Corporate Way, Suite 100		360 Corporate Way, Suite 100	
	Orange Park, FL 32073		Orange Park, FL 32073	
	September 27, 2016		L16000180332	
	Date of filing/registration in Florida	4.	Document number	
(a)	Eavenson, Fraser & Lunsford			
(ω)	Registered Agent and Registered Office shown on the records of	the Florid	ida Dept. of State:	
	4230 Pablo Professional Court			
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES	\$59	
•	Suite 250			
	Jacksonville FI	32224	4	:
(b)	Business Filings Incorporated Enter name of NEW Registered Agent and/or NEW Registered 1200 South Pine Island Road	Office at	ECRETARY LLAHASSI	FILE
	NEW Registered Office Address:		OF STA	0
	Plantation , FL	33324	4)
chai entw s/wc	mited liability company is not organized under the law age or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited line authorized by an affirmative vote of the members of the of organization or the operating agreement of the	the regi ability co of the lim limited	sistered office and the business office of the regist company, it is hereby confirmed that the change(s) mited liability company or as otherwise provided i liability company. Principal of Da	ered) in
ionati	Jantah Cell	Ch	hristopher R. Butler Management, LL	<u> </u>
	reole-monitor or althorized representative of a member y accept the appointment as registered agent and agr ms of all statules relative to the proper and complete gations of my position as registered agent as provide y reflect a change in the registered office address, I i	ee to aci	Printed or typed name of signee ct in this capacity. I further agree to comply with mance of my duties, and I on familiar with and ac	the

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