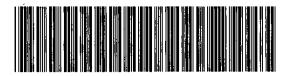
## L16000 190810

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



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SLURGIARY OF SIME TALLIANASSEE, TLOSH

MAR 0 6 2017 S. YOUNG

## COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations						
SUBJECT: Bourbon St Holdings LLC							
Name of Limited Liability Company							
Dear Si	ir or Madam:						
The end	closed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.					
Please	return all correspondence concerning this	matter to the following:					
Eric C	: Berben						
	Name of Person	pro- The state of					
Bourb	on St Holdings LLC						
	Firm/Company						
1242	SW Pine Island Rd Suite 42-286						
	Address						
Cape	Coral Fl. 33991						
	City/State and Zip Code						
bourb	onstreetholdings@gmail.com						
E.	-mail address: (to be used for future annua	al report notification)					
For furt	ther information concerning this matter, p	lease call:					
Eric J	Berben	239 247-0341					
	Name of Person	Area Code & Daytime Telephone Number					
	STREET/COURIER ADDRESS:	MAILING ADDRESS:					
Registration Section		Registration Section					
	Division of Corporations	Division of Corporations					
	Clifton Building	P.O. Box 6327					
	2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314					
	Enclosed is a check for the following amount:						
	<b>2</b> \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					

## 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	Jame of the limited liability company:  Bourbon St Holdings LLC			
2. (a)	1242 SW Pine Island Rd	(b)	same	
(+-)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(*).		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	suite 42-286			
	Cape Coral Fl 33991		***	
	Jan 25, 2017	Ĺ	160001	90810
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Timeshare Management Services LLC			
J. (u)	Registered Agent and Registered Office shown on the records of t	the Florida D	ept. of Sta	nte:
	1242 SW Pine Island Rd			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	suite 42-286			<b>1</b> F3
	Cape Coral, FL	33991		THAN -3
<b>(b)</b>	Eric C Berben			- R
(b) <u>'</u>	Enter name of NEW Registered Agent and/or NEW Registered Office address:			- <b>A</b> C
	1242 SW Pine Island Rd			: 24
	NEW Registered Office Address:		•	_
	suite 42-286			_
	Cape Coral , FL	33991		_
the cha agent w was/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the registenbility com f the limited limited lia	ered offic pany, it ed liabili	ce and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.
Signat	fure of a member or authorized representative of a member		5 50,50	Printed or typed name of signee
I herel provision the obli to mere	by accept the appointment as registered agent and agroups on sof all statutes relative to the proper and complete igations of my position as registered agent as provided ly reflect a change in the registered office address, I had in writing of this change.	ee to act ii performan i for in Ch nereby con	this cap ce of my apter 60 firm that	pacity I further agree to comply with the
Signatui	re of Registered Agent			