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COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations							
SUBJ	ECT:	PARK SORRENTO INVESTMENTS, LLC						
	Name	of Limited Liab	ility Company					
Dear S	Dear Sir or Madam:							
The e	nclosed Registered Agent/Registered Offic	e Change and fe	e(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:								
Mich	ael N. Moses							
•	Name of Person	. 144						
Mich	aelson Real Estate Group, LLC							
	Firm/Company							
1244	3 San Jose Boulevard							
	Address	· -						
Jack	sonville, FL 32223							
	City/State and Zip Code							
	oses@michaelsongroup.com							
	E-mail address: (to be used for future annu	al report notifica	tion)					
For fu	rther information concerning this matter, p	olease call:						
Gayl	e Orman	301 _ at (945-9252					
	Name of Person		Area Code & Daytime Telephone Number					
Registration Section Registr		LING ADDRESS: tration Section						
	Division of Corporations Clifton Building Division of Corporations P.O. Box 6327							
	2661 Executive Center Circle Tallahassee, Florida 32314							
	Tallahassee, Florida 32301							
	Enclosed is a check for the following amount:							
	2 \$25 Filing Fee	□ \$551	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.	Name of the limited liability company: PARK SORRENTO INVESTMENTS, LLC					
2	(a)	12443 San Jose Boulevard	(b) 2750 NW 79th Ave.			
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Suite 604		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		Suite 604	Dorai, F	L 33122		
		Jacksonville, FL 32223				
		11/23/2016	L160002	14312		
3.		Date of filing/registration in Florida	4.	Document number		
5.	(a)	CT Corporation System				
	(-)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State		왕 1		
		1200 South Pine Island Road				
		Registered Office Address (MUST BE FLORIDA STREET)	JAN 12			
				2 2		
		Plantation	33324			
		Michael N. Moses		17 JAN 12 AH II: 19		
(b)				. 9		
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:			
		c/o Michaelson Real Estate Group, LLC				
		NEW Registered Office Address:		•		
		12443 San Jose Blvd.		·		
				•		
		Jacksonville , FL	32223			
the ago wa	e cha ent v is/we	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liatere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the registered office ability company, it is if the limited liabilit limited liability com	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in		
		C	Axel Jordan			
	_	ture of a member or authorized representative of a member		Printed or typed name of signee		
pro the to	ovisi obl mere	by accept the appointment as registered agent and agr ons of 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 i I if writing of this change.	ee to act in this cape performance of my e d for in Chapter 605 hereby confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been		
Sig	d de la gratui	Michael N. Merc of Registered Agent	oses			

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