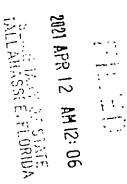
## L16000aaa054

(Requestor's Name)									
(Address)									
(Address)									
(Addiess)									
(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Business Entity Name)									
(Dusiness Entity Name)									
(Document Number)									
Certified Copies Certificates of Status									
, <u></u>									
Special Instructions to Filing Officer:									



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04/12/21--01023--007 \*\*75.08



Office Use Only

## **COVER LETTER**

	gistration Section ission of Corporations		,
SUBJECT:	OFSA SOUTH LLC		
oon ter		of Limited Lia	bility Company
Dear Sir or	Madam:		
The enclose	d Registered Agent/Registered Offic	e Change and fe	ec(s) are submitted for filing.
Please retur	n all correspondence concerning this	matter to the fo	ollowing:
SORRELL I	. STRAUSS		
	Name of Person		_
OFSA SOUT	TH LLC		
	Firm/Company		_
821 SE OCE	AN BLVD., STE A		
	Address		_
STUART, FI	1. 34994		
	City/State and Zip Code		
SSLRET21@	gmail.com		
E-mai	l address: (to be used for future annua	al report notific	ation)
For further i	information concerning this matter, p	lease call:	
SUE LACRO	DIX	772 at (	418-0919
	Name of Person	_ ** \	Area Code & Daytime Telephone Number
Reg Div P.O	iling Address: gistration Section vision of Corporations D. Box 6327 lahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enc	closed is a check for the following a	mount:	
<b>a</b> \$	25 Filing Fee	<b>\$</b> 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	ame of the limited liability company: OFSA SOUTH I	LLC								
2. (a)	SORRELL STRAILSS			(b) SORRELL STRAUSS						
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		· / _	•	ress of limited liability company: AY BE POST OFFICE BOX) D., STE A					
	821 SE OCEAN BLVD STE A		83	21 SE OCEAN BLVD.						
	STUART, FL 34994	_	STUART, FL 34994							
	12/07/2016		LI	5000222059						
3.	Date of filing/registration in Florida	4.		Document n	umber					
5. (a)	FOX, MICHAEL L									
J. (α)	Registered Agent and Registered Office shown on the records of	f the Florid	ia De	pt. of State:						
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				TALL TO	2021 APR 12				
	3743 SE WILLOUGHBY BLVD					ΛPI	. •			
	STUART , F	L	34994 CAL 				1			
(b)	SORRELL I STRAUSS				(MC)	A M				
(0)	Enter name of NEW Registered Agent and/or NEW Registere	d Office a	ddre:	<u></u>	FLORIDA	MH 12: 06	• •			
	821 SE OCEAN BLVD., STE A				**					
	NEW Registered Office Address:									
	CTUADT	24004								
	STUART, F	L <u>34994</u> L <u> </u>		· <del></del>						
change agent v was/we	imited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e register iability con the line of the li	red c omp nited liab	office and the busines any, it is hereby conf I liability company or	s office of firmed that	the re	gistered hange(s)			
Signa	Signature of a member or authorized representative of a member			Printed or typed name of signee						
I herei provisi the obl to mere	by accept the appointment as registered agent and agent on of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to ac perform d for in hereby c	t in . nanc Cha confi	this capacity. I furthe e of my duties, and I opter 605, F.S. Or, if s rm that the limited lic	er agree to am familio this docun ability con	comp ir with nent is npany	oly with the and accept being filed has been			
Signatu	re of Registered Agent									