L16000229947

(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
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R. WHITE JUL 16 2019

COVER LETTER

TO: Registration Section Division of Corporations								
SUBJECT: 7 E-350 XLT SB, LLC								
Name of Limited Liability Company								
Dear Sir or Madain:								
The enclosed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.						
Please return all correspondence concerning this	is matter to the	following:						
Spencer Angel								
Name of Person								
Firm/Company								
11211 SW 152ND ST								
Address		_						
Miami, Florida 33157								
City/State and Zip Code								
sangel@ppmcr.com								
E-mail address: (to be used for future ann	ual report notif	ication)						
For further information concerning this matter,	please call:							
spencer angel	305 at (255-1355						
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		AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314						
Enclosed is a check for the following amount:								
☑ \$25 Filing Fee	□ S5	55 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.

j.	Na	ume of the limited liability company: 7 E-350 XLT S	SB, LLC			
2	(a)	7 E-350 XLT SB, LLC	(b) 7 E-350 XLT SB, LLC			
۷.	(11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		11211 SW 152nd street		11211 SW 152nd street		
		Miami, FI 33157	_	Miami, FI 33157		
		12/21/2016	L	_16000229947		
3.		Date of filing/registration in Florida	4.	Document number		
5	(a)	Spencer Angel				
	()	Registered Agent and Registered Office shown on the records of the	ne Florida I	Dept. of State:		
		Registered Office Address (MUST BE FLORIDA STREET A 80 S.W. 8TH STREET, SUITE 2000	DDRESS)			
		Miami .FL	33130			
	(b)	Spencer Angel			F= 1	
	` '	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office add	ress:	-5	
		NEW Registered Office Address:			TP :	
		11211 SW 152nd street			2: +3 2: ♣	
		Miami , FL	33157		C.	
the ag wa the	e cha ent v as/we arti Mgnat	imited liability company is not organized under the law inge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liable or nuthorized by an affirmative vote of the members of cless of organization or the operating agreement of the law in the member of a member or authorized representative of a member of the law accept the appointment as registered agent and agree on all statutes relative to the proper and complete the second complete.	the regist bility cor the limit imited lia Sper	rered office and the business office inpany, it is hereby confirmed that ited liability company or as otherwisability company. Incer Angel Printed or typed name of sign this capacity. I further agree to	of the registered the change(s) ise provided in the change increase the comply with the	
to	mere	ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have thin writing of this change	for in Ci ereby coi	hapter 605, F.S. Or, if this documenties that the limited liability comp	wun ana accept ent is being filed pany has been	

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

Signature of Registered Agent