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Division of Corporations

Fax Number

: (850)617-6383

Account Name : BARNETT, KIRKWOOD, KOCHE, LONG & FOSTER, P.A.

Account Number : 072731001155

Phone

: (813)253-2020

Fax Number

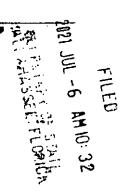
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H21000260048

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

(a)	(b)		
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)	
980 GULF BOULEVARD		980 GULF BOULEVARD	
BELLEAIR SHORES, FLORIDA 33786	BI	BELLEAIR SHORES, FLORIDA 33786	
01/27/2017	L17	000022087	
Date of filing/registration in Florida (a) PETER T. KIRKWOOD	4.	Document number	
Registered Agent and Registered Office shown on the records of 601 BAYSHORE BOULEVARD	of the Florida Dep	i, of State:	
Registered Office Address	T ADDRESS)	21 JUL F	
TAMPA, I	FL_33606	-6 -6	
(b) SUSAN C. CAIN Enter name of NEW Registered Agent and/or NEW Register.	ed Office address	AM 10: 32	
NEW Registered Office Address:			
980 GULF BOULEVARD			
BELLEAIR SHORES, F	IR SHORES, FL_33786		
the limited liability company is not organized under the lange or changes are made, the Florida street address of the the will be identical. Or, in the case of a Florida limited sowere authorized by an affirmative vote of the members articles of organization or the operating agreement of the source.	ne registered of liability compa s of the limited	fice and the business office of the registered my, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company. C. CAIN	
ignature of a member or authorized representative of a member		Printed or typed name of signee	