## 11000054835

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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## COVER LETTER

_	istration Section ision of Corporations			
SUBJECT:	SB131, LLC			
Name of Limited Liability Company				
Dear Sir or	Madam:			
The enclose	d Registered Agent/Registered Offi	ce Change and fe	e(s) are submitted for filing.	
Please retur	n all correspondence concerning thi	s matter to the fo	Howing:	
THERESA	A BENNETT			
	Name of Person		•	
LAW OFF	FICE OF THERESA BENNET	Г		
	Firm/Company		•	
500 SE 1	7th STREET, SUITE 323			
	Address		•	
FT. LAUD	DERDALE, FL 33316			
~	City/State and Zip Code		•	
_	patlawyer.com			
E-mai	l address: (to be used for future ann	ual report notifica	ation)	
For further i	information concerning this matter.	please call:		
THERESA	A BENNETT	954 at (	463-4007	
	Name of Person		Area Code & Daytime Telephone Number	
Reg Div Clif 266	REET/COURIER ADDRESS: gistration Section vision of Corporations fton Building of Executive Center Circle lahassee, Florida 32301	Regis Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, Florida 32314	
Enclosed is a check for the following amount:				
<b>2</b> 1 \$	\$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. N	ame of the limited liability company: SB131, LLC		
2. (a)	SB131, LLC	(b) SB131,	LLC
2. (4.)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ ` · - <del></del>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	15233 VENTURA BLVD., SUITE 500	15233 \	/ENTURA BLVD., SUITE 500
	SHERMAN OAKS, CA 91403	SHERM	IAN OAKS, CA 91403
	03/10/2017	L170000	54835
3.	Date of filing/registration in Florida	- 4.	Document number
5. (a)	REGISTERED AGENT SOLUTIONS, INC.		
υ. (u,	Registered Agent and Registered Office shown on the records of	the Florida Dept. of Sta	te:
	REGISTERED AGENT SOLUTIONS, INC.		
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	- 5-9- <b></b>
	155 OFFICE PLAZA DRIVE, SUITE A		
	TALLAHASSEE .FL	32301	
(b)	THERESA BENNETT		是 · · · · · · · · · · · · · · · · · · ·
. ,	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	
	LAW OFFICE OF THERESA BENNETT		<b>意味 の</b> 第
	NEW Registered Office Address:		<del>-</del>
	500 SE 17th STREET, SUITE 323		_
	FT. LAUDERDALE F1.	33316	
the ch agent was/w the art Sign I here provis the ob- to men- notifie	limited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the large of member or authorized representative of a member of the appointment as registered agent and agricultures of all statutes relative to the proper and complete ligations of my position as registered agent as provide all reflect a change in the registered office address. It is not the proper and complete a din writing of this change.	the registered office ability company, it of the limited liability control JOSH GOLE	te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in impany.  DER  Printed or typed name of signee  Dactive I further agree to comply with the
	UA BLANUM are of Registered Agent		

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