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ALIASISSEE, FLONDA

S. WARREN JUL 2 1 2017

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: SMA  Name of Lin	RT S P nited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Char	age and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter	to the following:	
Susanne Suc Name of Person		
SMART SP-Sunse	et Beach Shop	
2555 52nd Ave		
St. Petersburg City/State and Zip Code )	<u>F1</u> 33714	
Suzy Koolmail @ aw E-mail address: (to be used for future annual epo		
For further information concerning this matter, please of	call:	
Susanne Suchodolskat (	727) 410-1773.  Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
S25 Filing Fee	□ \$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.

1. Na	ame of the limited liability company: SMART 5P
	2000 62 1 1100 01
2. (a)	Principal office address of limited liability company:  Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
	St. Petershusa Fl
	22.011
	3/14/2017 L1700005896
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Susanne Suchodolski
J. (2)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	2555 52nd Ave N.
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	Ct Palaceburg 23714 Elle
	St. Petersburg, FL 33/14
(b)	Roger A Brown  Enter name of NEWPeristered Agent and/or NEW Registered Office address:
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	_ 2555 52nd Ave N. 95 3
	NEW Registered Office Address:
	$\mathcal{S}$
	St. Petersburg, FL 33714
If the 1	invited lightifus company to not appointed under the laws of the Case of Disside it is book and a start of the
the cha	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after ange or changes are made, the Florida street address of the registered office and the business office of the registered
agent v	will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
	Calada de Calada de Mariera de Calada de Calad
	ture of a member or authorized representative of a member    Conne
Signa	ture of a member or authorized representative of a member Printed or typed name of signee
provisi the obl to mer	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a change in the registered office address, I hereby confirm that the limited liability company has been d in writing of this change.

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