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COVER LETTER

TO: Registration Section Division of Corporations							
SUBJECT: Oftender Housing Man	Liability Company						
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Change a	nd fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the	he following:						
Bryan Florence Name of Person							
Offender 1-busing Manageme. Firm/Company	4 ((
2332 Commerce Bu. Address							
Orlando Florida 32807 City/State and Zip Code							
E-mail address: (to be used for future annual report no	affication)						
For further information concerning this matter, please call:							
Tulio Rodriguez at (40) Name of Person	7) 541- 9766 Area Code & Daytime Telephone Number						
Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Enclosed is a check for the following amount:							
\$25 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.

I. Na	me of the limited liability company: OFfender	Hove	sing_	Manage	ne.t	LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (b) _		Mailing address (Note: MAY	of limited lia	
	2332 Commune B.		0 d	Bax grdo	547 Fl.	758 32854
3. 5. (a)	Date of filing/registration in Florida Bryan Florence Registered Agent and Registered Office shown on the records of the	4.		Document n		<u>' '</u>
(b)	Registered Office Address (MUST BE FLORIDA STREET AL 2332 (ommerce Br Oclardo FL Tulio Rodriguez	32 V	07		TALLAHASSEE	
	Enter name of NEW Registered Agent and/or NEW Registered Office Address: 2332 Commune B	Three addre	· · · · · · · · · · · · · · · · · · ·	_	A STATE FLORIDA	AH 6: 12
	Onlando ,FL	32 <u>§</u>	07	_		
the cha agent w was/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liab	ne registe fility com the limite	red offic pany, it i ed liabilit	e and the bus is hereby conf ty company o	iness office	e of the registered the change(s)
I herel provision the oblit to mere	ure of a member or authorized representative of a member by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pro- gations of my position as registered agent as provided by reflect a change in the registered office address, I he is in writing of this change.	e to act in erforman for in Ch reby con,	this cap ce of my apter 60. firm that	Printed or type pacity. I furth duties, and I 5, F.S. Or, if the limited li	er agree to	o comply with the

Signature of Registered Agent