

L17000065M17

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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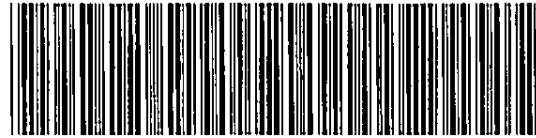
(Business Entity Name)

(Document Number)

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STATE OF CALIFORNIA
TALAMON, STEPHEN

FEB 1 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE MASTERS GROUP L.L.C.
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LARRY MILLER

Name of Person

INCFILE.COM, LLC

Firm/Company

17350 STATE HIGHWAY 249, SUITE 220

Address

HOUSTON, TX 77064

City/State and Zip Code

larry@incfile.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LARRY MILLER at (888) 462-3453

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

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

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2018 FEB -1 P 12:26
TALLAHASSEE, FLORIDA
CORPORATION DIVISION

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. Name of the limited liability company: THE MASTERS GROUP L.L.C.

2. (a) 6061 BALBOA CIR #103 (b) 6061 BALBOA CIR #103

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

BOCA RATON, FL 33433

BOCA RATON, FL 33433

03/22/2017

L17000065947

3. Date of filing/registration in Florida

4.

Document number

5. (a) ANTHONY MASTERS

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

6061 BALBOA CIR

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

#103

BOCA RATON, FL 33433

(b) LEGALINC CORPORATE SERVICES, INC.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

5237 SUMMERLIN COMMONS

NEW Registered Office Address:

SUITE 400

FORT MYERS, FL 33907

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2018 FEB - 1 P 12:26
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Anthony Masters
Signature of a member or authorized representative of a member

ANTHONY MASTERS

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Patty Schinatti
Signature of Registered Agent