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From:

Account Name : JORGE L. GURIAN P.A.

Account Number : I20010000123 Phone : (305)931-0541

Fax Number : (305)931-0568

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3.14-14

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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	me of the limited liability company:	2 LT(_	_			
2	(a)	900 S NORTHLAKE DR	(b) 900 S NORTHLAKE DR			ORTHLAKE DR		
	(-)	Principal office address of limited liability company:		•	M	Mailing address of limited liability or		
		(Note: MUST BE STREET ADDRESS)				(Note: MAY BE POST OFFICE	<u>BUX</u>)	
		HOLLYWOOD, FL 33019	_		HOLLYW	VOOD, FL 33019		
		03/28/2017	_	L	1700006	59744		
3.		Date of filing/registration in Florida	4.		<u>-</u> .	Document number	_ .	
5	(a)	KAAN ISCIL						
٠.	(a)	Registered Agent and Registered Office shown on the records of the South State of the Registered Office Address **Registered Office Address** **CHUST BE FLORIDA STREET ADDRESS OF THE STREET ADDRES	_		Dept. of State	- s: -		
		Kegwered Office Address Most port port police Address A	DDALL	-,,,,,		5. ~		
		HOLLYWOOD , FL	3301	19		ALLAMASSS		
	(b)	JLG CORPORATE SERVICES INC.				SSEC SSEC		
	(-/	Enter name of NEW Registered Agant and/or NEW Registered Office address:		P	m			
		1805 PONCE DE LEON BLVD		- 一名泉		1: 3 ORID	\bigcirc	
		NEW Registered Office Address:				<u>"</u> . ——		
		SUITE 400				_		
		CORAL GABLES, FL	331	34	_	-		
th ag w:	e chi ent i as/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lize ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the re bility f the l	gist cor imi	tered office npany, it is ted liabilit	e and the business office of this is hereby confirmed that the c ty company or as otherwise pi	ie registered hange(s)	
nothing -			_ •	JORGE L. GURIAN, ESQ.				
	•	ture of a member or authorized representative of a member				Printed or typed name of signee		
I pr th to no	here ovis e ob mer tifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I do not not this change.	ee to t perfor d for it hereby	act rma n C r co	in this cap ince of my hapter 605 nfirm that	pacity. I further agree to com duties, and I am familiar wid 5, F.S. Or, if this document is the limited liability company	ply with the h and accept being filed has been	
\$	ghan	ife of Registered Agent					•	