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Office Use Only

COVER LETTER

TO:	Registration Section		
	Division of Corporations		

MARSHALL INVESTMENT GROUP LLC

Name of Limited Liability Company

Dear Sir or Madam:

SUBJECT:

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

Please return all correspondence concerning this matter to the following:

Carl Marshall Jr

Name of Person

Marshall Investment Group LLC

Firm/Company

8270 Woodland Center Blvd

Address

Tampa, FL 33614

City/State and Zip Code

support@marshallinvesthomes.com

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

For further information concerning this matter, please call:

Carl Marshall Jr	941 822-7620 at ()
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Enclosed is a check for the following amount:

□ \$25 Filing Fee

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. 1	Varshall Investment of the limited liability company:	nent Grou	p LLC				
						<u>-</u>	
2. (a	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing add	ress of limited liab IAY BE POST OF	oility co	onipany:
	8270 Woodland Center Blvd.		8270	Woodland Cent	er Blvd.		
	Tampa, FL 33614		Tam	pa, FL 33614			
	04/21/2017		L1700	00089223			
3.	Date of filing/registration in Florida	4.		Documer	nt number		
5. (a	Registered Agent and Registered Office shown on the records of Carl Marshall Jr			of State:			
	Registered Office Address (MUST BE FLORIDA STREET 2682 N MCMULLEN BOOTH RD #5110				SECRE TALL	01 NUL 120	
	Clearwater, F				TAR) AHA	01 K	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u> REGUS	d Office a	ddress:		TARY OF STATE AHASSEE, FL	PH 12: 42	ГП С
	NEW Registered Office Address:						
	8270 Woodland Center Blvd.			<u>_</u>			
	Tampa, F	L					
chang agent was/v the ar Sign I here	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ly ore authorized by an affirmative vote of the members ticles of organization or the operating agreement of the advector of a member or authorized representative of a member above of a member and captions of all statutes relative to the proper and complete the propere	e registe iability o of the li c limited 	red offi compan mited l l liabilit rl Marsl ct in thi	by, it is hereby c iability company ty company. hall Jr Printed or is capacity. I find of my duties, an	r typed name of signature to a solution of the	the ch isc pro	gistered ange(s) ovided in
ine ot to me notifie	Provide the statistic relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change	hereby	confirm	that the limited	d liability com	pany l	has been

Signature of Registered Agent

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Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314