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(Requestor's Name)					
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates o	f Status			
Special Instructions to Filing Officer:					





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10/01/18--01033--002 **925.00



COVER LETTER

FO: Registration Section Division of Corporations		
SUBJECT: <u>S-ACQ, LLC</u> Name	e of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offic	ee Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Kathy Moro		
Name of Person		
Frank Weinberg Black, P.L. Firm/Company		
·		- 133 EE
7805 SW 6th Court Address		Ū
Plantation, FL 33324	X	25
City/State and Zip Code		
Lynda Watkins@Stiles.com KMoro@ivblaw.net E-mail address: (to be used for future annu For further information concerning this matter, p	•	
Lynda Watkins	at (<u>954) 627-9350</u>	
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 a	amount:	
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTHFOR 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.

۱.	Name of the limited liability company: <u>S-ACQ, LLC</u>		
2	(a) ATTN: Lynda Watkins	(b) <u>SAME</u>	
-	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(")	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	301 E LAS OLAS BLVD		
	FT. LAUDERDALE, FL 33301		
	05/01/2017	1	_17000095282
3.	Date of filing/registration in Florida	4.	Document number
5.	(a) CORPORATION SERVICE COMPANY		_ 3 3
	Registered Agent and Registered Office shown on the records of 1201 HAYS STREET	f the Florida Dept. of S	tate:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	TALLAHASSEE	L_32301	_ P 5
	(b) FRANK WEINBERG & BLACK P.L.		- × ×
	Enter name of NEW Registered Agent and/or NEW Registered	l Office address:	
	7805 SW 6th Court		
	NEW Registered Office Address:		
	C/O DAVID BLACK, ESQ.		<u></u>
	PLANTATION , FI	L_33324	
the ag	the limited liability company is not organized under the late change or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lias/were authorized by an affirmative vote of the members of a rticles of organization or the operating agreement of the	f the registered off ability company, it of the limited liabi	ice and the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in
_	Signature of a member or authorized representative of a member		Printed or typed name of signee
<i>no</i>	hereby accept the appointment as registered agent and agree ovisions of all statutes relative to the proper and complete e obligations of my position as registered agent as provide merely reflect a change in the registered office address. I office in writing of this change.	ree to act in this co performance of n ed for in Chapter 6 hereby confirm the	apacity. I further agree to comply with the ty duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been

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