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MAY 25 2017 J SHIVERS

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	SunLake Capital LLC					
301301		of Limited Liab	ility Company			
Dear S	ir or Madam:					
The en	The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.					
Please	return all correspondence concerning this	matter to the fo	llowing:			
Andre	ew Galante					
	Name of Person		•			
SunLa	ake Capital LLC					
	Firm/Company		•			
601 B	Brickell Key Drive, Suite 700					
	Address		•			
Miam	i, FL 33131					
	City/State and Zip Code		-			
ajg@s	sunlakecapital.com					
E	-mail address: (to be used for future annua	l report notifica	ation)			
For fur	ther information concerning this matter, pl	ease call:				
Andre	ew Galante	248 at (225-5931			
	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	Regis Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, 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.

1. Na	ame of the limited liability company: SunLake Cap	oital LLC			
2. (a)	601 Brickell Key Dr. Ste. 700	(b) 601 Brickell Key Dr. Ste. 700			
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(%).	-	ess of limited liability company: AY BE POST OFFICE BOX)	
	Miami, FL 33131	<u> </u>	Miami, FL 33131		
	5/1/2017		17000096695		
3.	Date of filing/registration in Florida	4.	Documen	t number	
5. (a)	Andrew Galante				
	Registered Agent and Registered Office shown on the records of	the Florida D	ept. of State:		
	2755 Coconut Ave		<u> </u>	\$% _	
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRESS)</u>		EL AH	
	Miami , FI	33133		MAY 25 CRETARY	
(b)	Andrew Galante			AN TO	
• • •	Enter name of NEW Registered Agent and/or NEW Registered Office address:		<u>ess</u> :	ORE ORE	
	601 Brickell Key Dr. Ste. 700			>	
	NEW Registered Office Address:				
	Miami , FL	_33131			
the cha agent v was/w the art:	imited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the large.	ws of the S f the registo ability com of the limite limited lia	ered office and the b spany, it is hereby co ed liability company	ousiness office of the registered onfirmed that the change(s)	
-	ture of a member or authorized representative of a member			typed name of signee	
I here provist the obt to mer notifie	by accept the appointment as registered agent and agions 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 d in writing of this change.	ree to act in performan ed for in Ch hereby con	n this capacity. I fu ce of my duties, and apter 605, F.S. Or, firm that the limited	rther agree to comply with the I I am familiar with and accept if this document is being filed I liability company has been	
Signan	Andrew Hafante ure of Registered Agent				
المناهدت	no or melimenes refere				